



The **Regulation** and
Quality Improvement
Authority

Cove Manor
RQIA ID: 1419
89 Mullanahoe Rd
Ardboe
BT71 5AU

Inspector: Raymond Sayers
Inspection ID: IN021535

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**Announced Estates Inspection
of
Cove Manor Nursing Home**

27 May 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

1. Summary of Inspection

An announced estates inspection took place on 27 May 2015 from 10.30am to 13.00pm. 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 items 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
Total number of requirements and recommendations made at this inspection	3	1

The details of the QIP within this report were discussed with Mr Sean McCartney (Registered Person) during the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Organisation/Registered Person: Cove Manor Care Home Ltd/ Mr Sean McCartney	Registered Manager: Ms Madge Quinn
Person in Charge of the Home at the Time of Inspection: Mr Sean McCartney	Date Manager Registered: 1 December 2012
Categories of Care: RC-PH, RC-LD(E), NH-I, RC-I, RC-MP(E), RC-PH(E), NH-PH, NH-DE	Number of Registered Places: 31
Number of patients/residents accommodated on Day of Inspection: 27	Weekly Tariff at Time of Inspection: Residential - £470 Nursing - £593

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: incidents register, previous estates inspection report and previous RQIA inspection report.

During the inspection the inspector met with Mr Sean McCartney (Registered Person) and Mr Rory McVeigh (Maintenance Supervisor); there were no other discussions held with staff, patients or visitors.

The following documents were reviewed during the inspection:

- Fire safety risk assessment plus records relating to the maintenance and inspection of the fire safety equipment;
- Legionella risk assessment plus records relating to the maintenance and inspection of the water storage and distribution services;
- Records relating to the maintenance and inspection of the building engineering services;
- Records relating to Lifting Operations and Lifting Equipment maintenance/inspection control measures;
- Records relating to general health and safety control measures/inspections.

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 13 October 2014, Ref IN016524. The completed QIP was returned, and the response approved as acceptable by the care inspector on 3 December 2014.

5.2 Review of Requirements and Recommendations from the last Estates Inspection

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulations 14.(2)(a),(b) & (c)	Verify that the BS7671 Periodic Inspection Report recommendations have been assessed and that that remedial/improvement works are planned/implemented in compliance with the Electricity at Work Regulations	Met
	Action taken as confirmed during the inspection: Remedial works completed; Reviewed Periodic Inspection Report dated 18 May 2015.	
Requirement 2 Ref: Regulations 14.(2)(a),(b) & (c)	Verify that LOLER 29/07/12 competent person report recommendations have been assessed, and that rectification/improvement works arrangements are listed in a works action plan for implementation.	Met
	Action taken as confirmed during the inspection: LOLER Regulation 9 report dated 22 May 2015 completed.	
Previous Inspection Recommendations		Validation of Compliance
Recommendation 1 Ref: Standard 32.5	Complete a survey of the sewerage/drainage system inspection chamber covers; implement corrective works action to eliminate potential trip hazards.	Met
	Action taken as confirmed during the inspection: Remedial works completed.	

Recommendation 2 Ref: Standard 36.1	Commission a fire safety consultant to review the fire safety arrangements; assess, prioritize and implement any subsequent recommendations in compliance with NIHTM84.	Not Met
	Action taken as confirmed during the inspection : Fire safety review completed by Maintenance Supervisor and Manager, Mr Rory McVeigh and Mr Sean McCartney using PAS 79 document.	

5.3 Standard 44: Premises

Is Care Safe? (Quality of Life)

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

[There were no issues identified for attention during this Estates inspection.]

Is Care Effective? (Quality of Management)

A range of accommodation, facilities and support services are provided in the premises. This supports the delivery of effective care.

[There were no issues identified for attention during this Estates inspection.]

Is Care Compassionate? (Quality of Care)

The areas of the premises reviewed during this Estates inspection were well presented, clean and free from malodours. This supports the delivery of compassionate care.

[There were no issues identified for attention during this Estates inspection.]

Areas for Improvement

Not applicable.

Number of Requirements	0	Number Recommendations:	0
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5.4 Standard 47: Safe and Healthy Working Practices

Is Care Safe? (Quality of Life)

A range of documents relating to the safe operation of the premises, installations and engineering services were presented for review during this Estates inspection. This supports the delivery of safe care.

[Three issues were however identified for attention during this Estates inspection. These are detailed in the 'areas for improvement' section below.]

Is Care Effective? (Quality of Management)

The nature and needs of the patients are considered as part of the risk assessment processes; these are reflected in the management of the home. This supports the delivery of effective care.

[There were no issues identified for attention during this Estates inspection.]

Is Care Compassionate? (Quality of Care)

There are health and safety procedures and control measures in place which support the delivery of compassionate care.

[There were no issues identified for attention during this Estates inspection.]

Areas for Improvement

A valid schedule of electrical appliances verifying Portable Appliance Test dates was not presented for review.

Refer to Quality Improvement Plan (QIP) Requirement 1.

Gas Safe Register engineer inspection/test certificate for laundry gas appliance was not presented for review.

Refer to Quality Improvement Plan (QIP) Requirement 2.

Mr McVeigh stated that the passenger lift Lifting Operations and Lifting Equipment Regulations (LOLER) Reg. 9 thorough examination had been completed on 22 May 2015 and the report had not yet been submitted by the inspection engineer.

Refer to Quality Improvement Plan (QIP) Requirement 3.

Number of Requirements	3	Number Recommendations:	0
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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.

[An issue was however identified for attention during this Estates inspection, and is detailed in the 'areas for improvement' section below.]

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.

[An issue was however identified for attention during this Estates inspection, and is detailed in the 'areas for improvement' section below.]

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.

[There were no issues identified for attention during this Estates inspection.]

Areas for Improvement

The fire risk assessment review was completed by Mr Sean McCartney and Mr Rory McVeigh using PAS79.

It is recommended that the annual review of the fire risk assessment should be carried out by a person or a company certified by a third party UKAS accredited certification body or a person who is registered with one of the fire safety professional bodies.

Refer to Quality Improvement Plan (QIP) Recommendation 1.

Number of Requirements	0	Number Recommendations:	1
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5.6 Additional Areas Examined

Not applicable.

6. Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Mr Sean McCartney (Responsible Person) 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 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

Statutory Requirements

Requirement 1 Ref: Regulation 14.(2)(a),(b) & (c) Stated: First time To be Completed by: 22 July 2015	Submit verification that the portable electrical appliances have been subjected to Portable Appliance Testing in compliance with HSE guidance "Maintaining Portable and Transportable Electrical Equipment (HSG107, INDG236 & 237). Response by Registered Manager Detailing the Actions Taken: Completed
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Requirement 2 Ref: Regulation 14.(2)(a),(b) & (c) Stated: First time To be Completed by: 22 July 2015	Submit verification that the laundry gas appliances are maintained and tested by a Gas Safe Register engineer in compliance with current gas safety regulations. Response by Registered Manager Detailing the Actions Taken: Ongoing due to calor relocation of gas bulk tank
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Requirement 3 Ref: Regulation 14.(2)(a),(b) & (c) Stated: First time To be Completed by: 22 July 2015	Submit verification that the passenger lift installation Lifting Operations and Lifting Equipment (LOLER) Reg. 9 thorough examination is currently valid and that any recommendations are assessed or prioritised for works action. Response by Registered Manager Detailing the Actions Taken: Completed
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Recommendations

Recommendation 1 Ref: Standard 36.1 Stated: Second time To be Completed by: 29 January 2016	It is recommended that the annual review of the fire risk assessment should be carried out by a person or a company certified by a third party UKAS accredited certification body or a person who is registered with one of the fire safety professional bodies. Reference should be made to correspondence issued by RQIA to all Registered January 2013 and the following guidance contained therein: http://www.rqia.org.uk/cms_resources/Competence%20of%20person:%20Fire%20Risk%20Assessment.pdf Response by Registered Manager Detailing the Actions Taken: Ongoing
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Registered Manager Completing QIP	Madge Quinn	Date Completed	20/07/2015
Registered Person Approving QIP	Sean McCartney	Date Approved	20/07/2015
RQIA Inspector Assessing Response	Raymond Sayers	Date Approved	*22/07/2015

** Clarification or follow up required on some items*

Please ensure the QIP is completed in full and returned to estates.mailbox@rqia.org.uk from the authorised email address