

Our ref **RS/DW**

25 September 2014

Mr James McCrystal
Registered Manager
Drapersfield House Nursing Home
19 Drapersfield Road
Cookstown
BT80 8RS

Dear Mr McCrystal

I refer to the **Announced Estates** inspection of **Drapersfield Nursing Home** undertaken on **25 September 2014** and enclose for your attention the draft report and quality improvement plan (QIP) which details the requirements/ recommendations to be addressed as a result of the inspection.

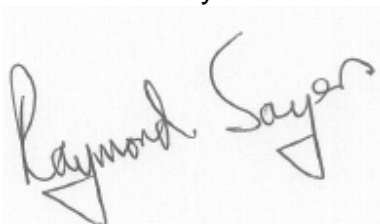
The QIP should be completed in detail and returned to this office by **23 October 2014**. A copy should be retained for your records. If you disagree with the factual accuracy of the report you should make a separate response to the above email address in order that amendments can be considered and made or your comments appended.

On **24 October 2014** the inspection report will be made open to the public (bar any communication regarding factual accuracy). If you have not returned your completed QIP by this date, the report will still be made open without your comments.

You will be aware that the report, the QIP and any other response you submit will constitute the open report on the service and will be made available to interested parties on request. If no proposed amendments are received in writing by the required date given above, I would ask you to regard this copy of the report as final and an open document effective from **24 October 2014**.

Thank you for your co-operation.

Yours sincerely

A handwritten signature in black ink that reads "Raymond Sayers". The signature is written in a cursive style with a large 'R' and 'S'.

Raymond Sayers
Estates Inspector



**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:	IN016795
Establishment ID No:	1420
Name of Establishment:	Drapersfield House
Date of Inspection:	14 August 2014
Inspector's Name:	Raymond Sayers

1.0 GENERAL INFORMATION

Name of Home:	Drapersfield House
Address:	19 Drapersfield Rd Cookstown BT80 8RS
Telephone Number:	028 8676 4868
Registered Organisation/Provider:	Mr James McCrystal & Mrs A McCrystal
Registered Manager:	Mr James McCrystal
Person in Charge of the Home at the time of Inspection:	Ms Jill Canavan
Other person(s) consulted during inspection:	
Type of establishment:	Nursing Home
Number of Registered Places:	45
Date and time of inspection:	14 August 2014 from 08.30 – 11.10hrs
Date of previous estates inspection:	19 June 2012
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 Ms Jill Canavan;
- 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 to Ms Jill Canavan.

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

Drapersfield House is situated in a quiet, rural location on the outskirts of Cookstown, Co Tyrone.

The home is owned and operated by Mr James and Mrs A McCrystal. The current registered manager is Mr James McCrystal. The nurse manager's post is currently vacant.

The home is a large detached property which was converted and developed to provide both nursing and residential care accommodation.

Accommodation is provided over three floors with access from the ground floor via a through floor passenger lift and stairs. There are 33 single and six double bedrooms.

Communal lounges and dining areas are provided over the three floors.

The home also provides for catering and laundry services on the ground floor. A number of communal sanitary facilities are available throughout the home.

Adequate car parking facilities are provided at the front of the home.

An enclosed sensory garden is maintained in the courtyard at the rear of the home where patients and residents can pursue their horticultural interests and or relax in tranquil, secure surroundings.

The home is registered in the following categories of care:

Nursing 1 - Old age not falling within any other category.

Nursing PH, PH(E) - Physical disability other than sensory impairment under and over 65 years

Learning disability LD, LD(E) - Learning disability under and over 65 years.

Residential – one old age not falling within any other category.

Residential MP(E) - Mental disorder excluding learning disability under and over 65 years.

8.0 SUMMARY

Following the Estates Inspection of Drapersfield House on 14 August 2014 improvements are required to comply with the Nursing Homes Regulations (Northern Ireland) 2005 and the criteria outlined in the following standards:

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

The inspection resulted in six requirements, listed in the quality improvement plan appended to this report.

Interior and exterior decoration works are currently progressing, some building service maintenance works completion validation certificates require submission for RQIA approval.

Fire safety works completion verification is required.

The Estates Inspector would like to acknowledge the assistance of Ms Jill Canavan during the inspection process.

9.0 INSPECTOR'S FINDINGS

9.1 Recommendations and requirements from previous inspection

All six requirements listed in the report of the previous estates inspection on 19 June 2012 have been addressed.

The completed Quality Improvement Plan (QIP) return submitted by the Responsible Person indicates a positive response to all six items listed and is available for examination in the RQIA website section "Inspections"; the previous report QIP responses were also verified as correct during the 14 August 2014 inspection.

Four of the 19 June 2012 QIP items related to verification of building service maintenance works, one item related to health and safety management controls and one item was related to a minor maintenance issue.

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; the building and engineering services however 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 - 9.2.3. Requirements and recommendations are listed in the attached Quality Improvement Plan section titled '**Standard 32 - Premises and grounds**'.

9.2.2 Ground floor dining room wall finish had sustained some minor scratches & marks as a result of impact with wheelchairs etc. Oak sitting room wall paper has deteriorated and requires replacement; facility manager indicated that a refurbishment plan was prepared. Cleaner store wall paintwork was stained. Bedroom 3 wall-paper finish was stained/deteriorated. Hairdresser room wall finish was stained.

The decorative finish of the building exterior rear elevation was in a poor condition, paintwork was deteriorated and peeling off surfaces. Window frames and the external escape staircase surfaces were severely weathered; the facility manager stated that redecoration works had commenced, the front elevation was completed and that the deteriorated paint finishes would be refurbished.

It was noted that some of the window frame glazing beads were severely decayed due to wet rot.

(Reference: Quality Improvement Plan Item 1)

9.2.3 Bedrooms 28, 36 & 38 wash basin/wall tile junctions silicone sealant was deteriorated/degraded.

(Reference: Quality Improvement Plan Item 2)

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, some issues have been identified for attention by the registered person. Items requiring corrective/improvement action by the registered person are detailed in report paragraphs 9.3.2- 9.3.3. Requirements and recommendations are listed in in the attached Quality Improvement Plan section titled '**Standard 35 - Safe and healthy working practices**'.

9.3.2 The home manager indicated that the Thermostatic Mixing Valves (TMVs) had been subjected to annual periodic maintenance on 11 August 2014; the maintenance works verification certificate however had not yet been received by the home management.

(Reference: Quality Improvement Plan Item 3)

- 9.3.3 The BS7671 Periodic Inspection Report for the electrical installation was last completed on 25 May 2011, the report validity was three years; home manager indicated that an inspection was completed on 31 July 2014, however the inspection report had not yet been received by home manager. (Reference: Quality Improvement Plan Item 4)
- 9.3.4 The hot and cold water storage and distribution systems were chlorinated on 6 March 2014
- 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 the home are compliant with this standard. Records inspected demonstrate good attention to fire safety matters. There are however two issues which need to be addressed detailed in report paragraphs 9.4.2 & 9.4.3. Requirements and recommendations are listed in the section of the attached quality improvement plan titled '**Standard 36: Fire safety**'.
- 9.4.2 The facility HTM84 fire risk assessment was completed on 23 June 2014 by an accredited fire risk assessor, Mr Neil Rea, NSI 00371. Fire risk assessment recommendations implemented were not validated as complete by a competent person. (Reference: Quality Improvement Plan Item 5)
- 9.4.3 Treatment room door or frame did not have an intumescent strip or smoke brush installed. (Reference: Quality Improvement Plan Item 6)
- 9.4.4 The ground floor office containing communications equipment was protected by a smoke detector sensor but the door did not have a self-closer installed. (Reference: Quality Improvement Plan Item 6)
- 9.4.5 Fire safety user tests, drills and training were completed by the user.

10.0 QUALITY IMPROVEMENT PLAN

The details of the Quality Improvement plan appended to this report were discussed with Ms Jill Canavan as part of 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.

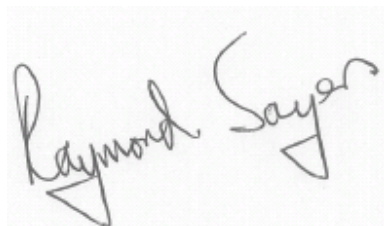
Recommendations are based on the Department of Health, Social Services and Public Safety's minimum standards for registration and inspection, promote current good practice and should be considered by the management of the home to improve the quality of life experienced by residents.

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**

A handwritten signature in black ink, reading "Raymond Sayers". The signature is written in a cursive style with a large 'R' and 'S'.

**Raymond Sayers
Estates Inspector**

25 September 2014

Date

Announced Estates Inspection to Drapersfield House Nursing Home on 14 August 2014

Assurance, Challenge and Improvement in Health and Social Care



The Regulation and
Quality Improvement
Authority

Quality Improvement Plan

Announced Estates Inspection

Drapersfield House Nursing Home : RQIA ID (1420)

14 August 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 Ms Jill Canavan 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.

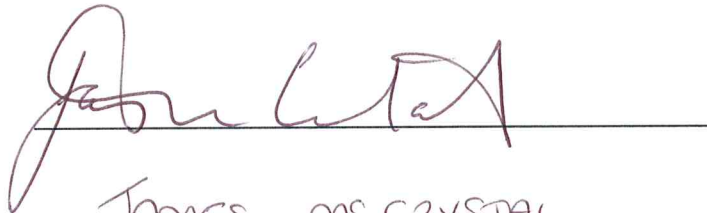
Recommendations are based on the Department of Health, Social Services and Public Safety's minimum standards for registration and inspection, promote current good practice and should be considered by the management of the home to improve the quality of life experienced by patients.

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:



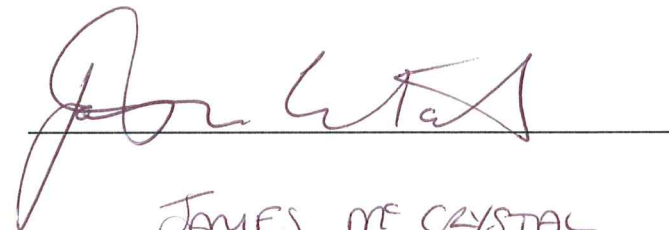
NAME:
(print)

JAMES MC CRYSTAL
REGISTERED PROVIDER

DATE:

23.10.2014

SIGNED:



NAME:
(print)

JAMES MC CRYSTAL
REGISTERED MANAGER

DATE:

23.10.2014

Announced Estates Inspection to Drapersfield House Nursing Home on 14 August 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.	Regulations 27. (2)(b) & (d)	Complete a condition survey of all interior and exterior surface finishes, implement a planned maintenance works programme to restore the building fabric to a good condition. (Reference: Report paragraph 9.2.2)	16 weeks	plan has been implement and com
2.	Regulation 27. (2)(b)	Inspect all washbasin/wall junctions, where necessary remove and replace deteriorated silicone sealant. (Reference: Report paragraph 9.2.3)	8 weeks	Completed.

Announced Estates Inspection to Drapersfield House Nursing Home on 14 August 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 verification that the Thermostatic Mixing Valves have received maintenance works in compliance with health and safety policy control measures. (Reference: Report paragraph 9.3.2)	8 weeks	copy enclosed
4.	Regulations 14. (2)(a),(b) & (c)	Submit a copy of the BS7671 Periodic Inspection Report for the electrical installation, for RQIA estates inspector examination. (Reference: Report paragraph 9.3.3)	8 weeks	copy enclosed

Announced Estates Inspection to Drapersfield House Nursing Home on 14 August 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)
5.	Regulations 27.(4)(a),(d)(i) & (ii)	Submit verification that the fire safety risk assessment recommended corrective/improvement works are implemented. Implementation of Health Technical Memorandum 84 (HTM84) fire safety risk assessment report recommendations must be validated by a competent person. (Reference: Report paragraph 9.4.2)	8 Weeks	Copy enclosed.
6.	Regulations 27.(4)(a),(d)(i) & (ii)	Implement improvement works to upgrade fire resistance of Treatment room and Ground Floor Office doors, to thirty minute fire and smoke resistance specification. (Reference: Report paragraphs 9.4.3 & 9.4.4)	8 Weeks	Completed.

Announced Estates Inspection to Drapersfield House Nursing Home on 14 August 2014

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