



The Regulation and
Quality Improvement
Authority

**THE REGULATION AND QUALITY IMPROVEMENT
AUTHORITY**

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ANNOUNCED ESTATES INSPECTION

Inspection No:	17900
Establishment ID No:	1425
Name of Establishment:	Chester Private Nursing Home
Date of Inspection:	2 April 2014
Inspector's Name:	Gavin Doherty

1.0 GENERAL INFORMATION

Name of Home:	Chester Private Nursing Home
Address:	27-29 Chester Avenue Whitehead BT38 9QQ.
Telephone Number:	028 9335 3060
Registered Organisation/Provider:	Chester Homes Ltd.
Registered Manager:	Mrs Gillian Dowds
Person in Charge of the Home at the time of Inspection:	Mrs Gillian Dowds
Other person(s) consulted during inspection:	Mr. David Wharry, Maintenance Officer.
Type of establishment:	Nursing Home
Number of Registered Places:	43 (NH-DE, RC-DE, RC-LD, RC-MP(E))
Date and time of inspection:	2 April 2014 from 1030-1300
Date of previous inspection:	9 December 2013
Name of Inspector:	Gavin Doherty

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 the 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:

- HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003
- 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 the person in charge
- 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 Mrs Gillian Dowds, Registered Manager and Mr. David Wharry, the home's maintenance officer.

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

Chester Private Nursing Home is situated in a residential area in the village of Whitehead. The home was originally a school and has been adapted and extended to provide accommodation for persons requiring nursing and residential care. Bedroom accommodation is provided in single and double rooms over four floors. There is a large conservatory area on the ground floor. Dining/lounge facilities, a small visitors' room, catering facilities and domestic/laundry facilities are also provided.

The home is registered to provide care for 43 persons and is also approved to provide care on a day basis to 3 persons

8.0 SUMMARY

Following the Estates Inspection of Chester Private Nursing Home on 2 April 2014, improvements are required to comply with the Nursing Homes Regulations (Northern Ireland) 2005 and the criterion outlined in the following standards:

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

This resulted in two requirements and no recommendations. These are outlined in the quality improvement plan appended to this report.

The Estates Inspector would like to acknowledge the assistance of Mrs Gillian Dowds and Mr. David Wharry for their assistance during the inspection process.

9.0 INSPECTOR'S FINDINGS

9.1 Recommendations and requirements from previous inspection

- 9.1.1 The requirements and recommendations stated in the report of the previous estates inspection on 9 December 2013 have been fully addressed.

Floor finishes were replaced in the highlighted Bedrooms and new carpet and nosings have been fitted to the main and rear staircases. New ceiling tiles have been installed in the highlighted Bedrooms and the bedrooms have been redecorated throughout the home.

With regards to fire safety within the home, the Northern Ireland Fire and Rescue Service visited the home on the 6 June 2013 and found it to be 'Broadly Compliant' with current fire safety legislation.

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 good evidence of on-going maintenance activities within the home and the home appeared clean with many areas having been recently redecorated. Maintenance procedures for the building and engineering services were in place and records are maintained and were available for inspection within the home. However one issue was identified for attention by the registered manager. This is detailed below and in the section of the attached quality improvement plan titled '**Standard 32 – Premises and grounds**'.

- 9.2.2 The seal in the double glazed window unit in Bedroom 25 had broken down and should be replaced. Mr David Wharry stated he was aware of this and a replacement unit had been authorised.
(Item 1 in the attached Quality improvement plan)

9.3 **Standard 35 - Safe and healthy working practices** - *The home is maintained in a safe manner*

- 9.3.1 By in large, safe and healthy working practices continue to be evident in the home in accordance with this standard although several issues have been identified for attention by the registered manager. These are detailed below and in the section of the attached quality improvement plan titled '**Standard 35 - Safe and healthy working practices**'.
- 9.3.2 Confirmation is required that thermostatic mixing valves fitted at the new shower facilities are type 3 specification which will 'fail safe' on the failure of

the cold water supply.

An email was subsequently received on 23 April 2014 from Wilson Group with an attachment from their plumbing and heating engineer confirming that this was the case. A requirement is therefore not required at this time.

- 9.3.3 The wardrobes in Bedrooms 19, 21 and 28 had not been re-secured to the wall following the redecoration of each room. Mr David Wharry stated that each wardrobe would be securely fixed to the wall before the end of the day. Also various items were noted on the floor of the store adjacent to Bedroom 14. Again, Mr. David Wharry stated that these items would be appropriately relocated before the end of the day.

The registered manager confirmed this work had been carried out in a subsequent phone call. A requirement is therefore not required at this time.

- 9.3.4 Deadleg pipework was noted in the new store opposite Bedroom 31. All redundant pipework should be removed from this area.
(Item 2 in the attached Quality improvement plan)

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 in the home are generally in line with this standard. A current fire risk assessment is in place for the home and Fire drills continue to be carried out periodically for both day and night staff. The fire alarm and detection system, emergency lighting installation and the portable fire-fighting equipment are suitably serviced and maintained, with records available for inspection within the home. There are therefore no requirements or recommendations made against this standard as a result of this inspection.

10.0 QUALITY IMPROVEMENT PLAN

The details of the Quality Improvement plan appended to this report were discussed with Mrs Gillian Dowds 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 Nursing home to improve the quality of life experienced by patients.

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**



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Authority

Quality Improvement Plan

- for -

Announced Estates Inspection

- of -

Chester Private Nursing Home

- on -

2 April 2014

QIP Position Based on Comments from Registered Persons			QIP Closed		Estates Officer	Date
			Yes	No		
A.	All items confirmed as addressed.		✓		Gavin Doherty	27/10/2014
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 Mrs Gillian Dowds and 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 Nursing 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 estates@rqia.org.uk.

Please complete the following table to demonstrate that this Quality Improvement Plan has been completed by the registered manager and approved by the responsible person / identified responsible person:

NAME OF REGISTERED MANAGER COMPLETING QIP	Ms Gillian Dowds
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	Mr Desmond Wilson

Announced Estates Inspection to Chester Private Nursing Home on 2 April 2014

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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	Requirement.	Timescale	Details Of Action Taken By Registered Person (S)
1	Regulation 27 (2)(b),(d)	Ensure the double glazed window unit in Bedroom 25 is replaced during the current window replacement program. (Refer to 9.2.2 in the Report)	12 Weeks	Bowman windows have replaced unit to this room when on site replacing windows to side elevation .Completed .

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	Requirement.	Timescale	Details Of Action Taken By Registered Person (S)
2	Regulation 27 (2)(q) 14 (2)(a),(c)	Ensure the deadleg pipework in the new store opposite Bedroom 31 is removed from the system. (Refer to 9.3.4 in the Report)	12 Weeks	Commenced on day of inspection and completed fully by David Wharry on 3 rd of April 2014.

Announced Estates Inspection to Chester Private Nursing Home on 2 April 2014

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