

Announced Premises Inspection Report 25 August 2016



Massereene Manor

Type of service: Nursing Home
Address: 6 Steeple Road, Antrim, BT41 1AF
Tel No: 028 9448 7779
Inspector: Gavin Doherty

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

1.0 Summary

An announced premises inspection of Massereene Manor took place on 25 August 2016 from 10:30 to 13:00.

Is care safe?

On the day of the inspection the premises supported the delivery of safe care. However one issue was identified for attention by the registered provider. Refer to section 4.3

Is care effective?

On the day of the inspection the premises supported the delivery of effective care.

Is care compassionate?

On the day of the inspection the premises supported the delivery of compassionate care.

Is the service well led?

On the day of the inspection the management of the premises was considered to be well led.

This inspection was underpinned by The Nursing Homes Regulations (Northern Ireland) 2005 and the Care Standards for Nursing Homes 2015.

1.1 Inspection outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	1	0

Details of the Quality Improvement Plan (QIP) within this report were discussed with Mr Stephen Montgomery, Director with Hutchinson Homes, 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.

1.2 Actions/enforcement taken following the most recent premises inspection

Other than those actions detailed in the QIP there were no further actions required to be taken following the most recent premises inspection.

2.0 Service details

Registered organisation/registered person: Massereene Manor/Ms Naomi Carey & Mrs Janet Montgomery	Registered manager: Mrs Olive Hall
Person in charge of the home at the time of inspection: Mrs Olive Hall	Date manager registered: 01 April 2005
Categories of care: NH-LD, NH-LD(E), RC-DE, NH-DE, NH-MP, NH-MP(E)	Number of registered places: 74

3.0 Methods/processes

Prior to inspection the following records were analysed: Previous premises inspection report, statutory notifications over the past 12 months, duty call log.

During the inspection the inspector met with Mr Stephen Montgomery, Director with Hutchinson Homes.

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.

4.0 The inspection

4.1 Review of requirements and recommendations from the most recent inspection dated 11/07/2016

The most recent inspection of the home was an unannounced finance inspection. The completed QIP was returned and approved by the specialist inspector on 14 August 2016. This QIP will be validated by the specialist inspector at the next finance inspection.

4.2 Review of requirements and recommendations from the last premises inspection dated 30 May 2013

Last premises inspection statutory requirements		Validation of compliance
Requirement 1 Ref: Regulation 27 (2)(q) 13 (7) Stated: First time	Ensure that a suitable and sufficient review of the home's risk assessment for 'The control of legionella bacteria in water systems' is undertaken and that suitable control measures are maintained.	Met
	Action taken as confirmed during the inspection: Inspector confirmed that a current risk assessment was undertaken on 12 March 2016 and was available at the time of inspection.	
Requirement 2 Ref: Regulation 27 (2)(q) 14 (2)(a),(c) Stated: First time	Ensure that an inspection and test of the home's electrical fixed wiring is undertaken, and that any remedial works required as a result are fully implemented without further delay.	Met
	Action taken as confirmed during the inspection: Inspector confirmed that a current inspection of the home's fixed electrical installation was available and up to date at the time of inspection.	
Requirement 3 Ref: Regulation 27 (4)(a) Stated: First time	Ensure that due consideration is given to the recent guidance issued by RQIA on the 31 January 2013 with regards to the competence of persons carrying out fire risk assessments in regulated residential care establishments.	Met
	Action taken as confirmed during the inspection: Inspector confirmed that the risk assessment undertaken on 18 April 2016 was completed by a risk assessor holding professional body registration for fire risk assessors.	
Requirement 4 Ref: Regulation 27 (4)(d) Stated: First time	Ensure that the weekly test of the fire alarm and detection system and the monthly function checks of the emergency lighting installation are in place for the home and that records are maintained and are available for inspection.	Met
	Action taken as confirmed during the inspection: Inspector confirmed that these tests were in place and that records were available and up to date at the time of inspection.	

4.3 Is care safe?

A range of documentation in relation to the maintenance and upkeep of the premises was presented for review during this premises inspection. This documentation included inspection and test reports for various elements of the engineering services and risk assessments. Documentation relating to the safe operation of the premises, installations and engineering services was presented for review during this premises inspection.

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.

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 service users, the management policies and the availability of adequately trained staff. This standard has been referenced in the fire risk assessment which was carried out by a risk assessor holding professional body registration for fire risk assessors. This supports the delivery of safe care.

One issue was however identified for attention during this premises inspection. This is detailed in the 'areas for improvement' section below.

Areas for improvement

1. The locking arrangements for the Linen stores throughout the John Irvine section of the home should be reviewed to ensure that the ironmongery fitted allow these doors to effectively self-close. Consideration should also be given to the storage arrangements within these stores to ensure that flammable items are not stored immediately adjacent to any electrical installations.
(Refer to requirement 1 in the Quality Improvement Plan).

Number of requirements	1	Number of recommendations:	0
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4.4 Is care effective?

There are arrangements in place for routine premises management and upkeep as well as timely breakdown/repair maintenance. Service users are involved where appropriate in decisions around the upkeep of the premises.

This supports the delivery of effective care.

No areas for improvement were identified during the inspection.

Number of requirements	0	Number of recommendations:	0
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4.5 Is care compassionate?

The areas of the premises reviewed during this premises inspection were well presented, comfortable, clean, free from malodours and adequately lit.

Service users are consulted about decisions around décor and the private accommodation where appropriate.

This supports the delivery of compassionate care.

No areas for improvement were identified during the inspection.

Number of requirements	0	Number of recommendations:	0
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4.6 Is the service well led?

Premises related policies and documentation are retained in a manner which is accessible to relevant people.

Arrangements are in place for managing premises related incidents/notifiable events and Medical Device and Equipment Alerts.

The registered person has dealt appropriately with previous RQIA QIP items and other relevant issues relating to the premises and has been adequately supported and resourced by the Registered Responsible Person.

There are appropriate relationships with maintenance personnel, specialist contractors and other statutory regulators where appropriate.

This supports a well led service.

No areas for improvement were identified during the inspection.

Number of requirements	0	Number of recommendations:	0
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5.0 Quality improvement plan

Any issues identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Mr Stephen Montgomery, Director with Hutchinson Homes, as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/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 provider 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 the nursing home. 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.

5.1 Statutory requirements

This section outlines the actions which must be taken so that the registered provider meets legislative requirements based on Nursing Homes Regulations (Northern Ireland) 2005.

5.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and The Care Standards for Nursing Homes 2015. They promote current good practice and if adopted by the registered provider/manager may enhance service, quality and delivery.

5.3 Actions taken by the registered provider

The QIP should be completed and detail the actions taken to meet the legislative requirements and recommendations stated. The registered provider should confirm that these actions have been completed and return the completed QIP to Estates.Mailbox@rqia.org.uk for assessment by the inspector.

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 registered provider from their responsibility for maintaining compliance with the regulations and standards. It is expected that the requirements and recommendations outlined in this report will provide the registered provider with the necessary information to assist them to fulfil their responsibilities and enhance practice within the service.

Quality Improvement Plan

Requirements

Requirement 1

Ref: Regulation 27 (4)

Stated: First time

To be completed by:
20 October 2016

The locking arrangements for the Linen stores throughout the John Irvine section of the home should be reviewed to ensure that the ironmongery fitted allow these doors to effectively self-close.

Consideration should also be given to the storage arrangements within these stores to ensure that flammable items are not stored immediately adjacent to any electrical installations.

Response by registered provider detailing the actions taken:

The locking arrangements for the linen stores have been reviewed to ensure these doors close adequately.

Please ensure this document is completed in full and returned to Estates.Mailbox@rqia.org.uk from the authorised email address



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