

# Announced Premises Inspection Report 14 JULY 2016



## Milesian Manor

**Type of Service: Nursing Home**  
**Address: 9 Ballyheifer Road, Magherafelt, BT45 5DX**  
**Tel No: 028 796 31842**  
**Inspector: Raymond Sayers**

[www.rqia.org.uk](http://www.rqia.org.uk)

Assurance, Challenge and Improvement in Health and Social Care

## 1.0 Summary

An announced premises inspection of Milesian Manor took place on 14 July 2016 from 10.00 to 13.15hrs.

### Is care safe?

On the day of the inspection the premises supported the delivery of safe care. Refer to section 4.3.

### Is care effective?

On the day of the inspection the premises supported the delivery of effective care. Refer to section 4.4.

### Is care compassionate?

On the day of the inspection the premises supported the delivery of compassionate care. Refer to section 4.5.

### Is the service well led?

On the day of the inspection the management of the premises was considered to be well led. Refer to section 4.6.

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
<b>Total number of requirements and recommendations made at this inspection</b>	0	1

This inspection resulted in no requirements and one recommendation being made. Findings of the inspection were discussed with Mrs Martha O`Kane, Registered Manager, as part of the inspection process and can be found in the main body of the report.

Enforcement action did not result from the findings of this inspection.

## 1.2 Actions/enforcement taken following the most recent premises inspection

There were no further actions required to be taken following the most recent inspection.

## 2.0 Service Details

<b>Registered organisation/registered provider:</b> Macklin Care Homes Ltd	<b>Registered manager:</b> Martha O’Kane
<b>Person in charge of the home at the time of inspection:</b> Martha O’Kane	<b>Date manager registered:</b> 01 April 2005
<b>Categories of care:</b> NH-I, RC-I, NH-PH, NH-PH(E)	<b>Number of registered places:</b> 34

## 3.0 Methods/processes

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

During the inspection the inspector met with: two patients, Ms Martha O’Kane (Registered Manager), Mr Seamus Speers (Maintenance Supervisor), kitchen and laundry staff.

The following records were examined during the inspection: Copies of building services certificates, building user log books relating to maintenance inspections of building 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 21/06/2016

The most recent inspection of the home was a post-registration care inspection, IN024461 dated on 21 June 2016. The completed QIP has not yet been returned for evaluation and approval by the care inspector. This QIP will be validated by the specialist inspector at their next inspection

### 4.2 Review of requirements and recommendations from the last premises inspection dated 15/05/2013

No requirements or recommendations.

### 4.3 Is care safe?

A range of building services maintenance documents were presented for review during this estates inspection. This documentation included: risk assessments, inspection and test reports for various elements of the engineering services.

Documentation relating to the safe operation of the premises, installations and engineering services was presented for review during this estates 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 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 completed by a risk assessor holding professional body registration for fire risk assessors. This supports the delivery of safe care.

<b>Number of requirements</b>	<b>0</b>	<b>Number of recommendations:</b>	<b>0</b>
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### 4.4 Is care effective?

There are arrangements in place for routine premises management plus emergency break-down repairs. Service users are involved, where appropriate in decisions around the redecoration and maintenance of the premises.

A major refurbishment/extension project has been proposed by the registered person, the existing building interior will be upgraded and an extension added during the proposed works.

The issues identified for attention during this premises inspection are detailed in the 'areas for improvement' section below, and will be remedied during the proposed redevelopment project.

#### Areas for improvement

1. The condition of the Ground Floor corridor carpet is deteriorating due to wear and tear.

(Refer to Quality Improvement Plan recommendation 1)

2. There is mould/mildew staining in the Shower room adjacent bedroom 2, the staining and mildew is noted at the skirting floor junction, and at shower wall panel junctions.

(Refer to Quality Improvement Plan recommendation 1)

3. Bedroom furniture has sustained wear and tear deterioration, and is in need of renewal.

(Refer to Quality Improvement Plan recommendation 1)

4. A number of doors and door frames had sustained surface damage as a result of impact with hoists and wheelchairs.

(Refer to Quality Improvement Plan recommendation 1)

5. The exterior fire escape stairway paint coating displayed evidence of surface corrosion, and required a renewal of the protective coating.

(Refer to Quality Improvement Plan recommendation 1)

<b>Number of requirements</b>	<b>0</b>	<b>Number of recommendations:</b>	<b>1</b>
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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. However a number of items relating to the environment were identified for attention by the registered person. These are outlined in 4.4 above and recommendation 1 in the attached QIP.

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

The service users consulted expressed satisfaction with the standard of the environment within the home.

This supports the delivery of compassionate care.

<b>Number of requirements</b>	<b>0</b>	<b>Number of recommendations:</b>	<b>0</b>
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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 persons.

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.

<b>Number of requirements</b>	<b>0</b>	<b>Number of recommendations:</b>	<b>0</b>
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## 5.0 Quality improvement plan

Any issues identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Ms Martha O`Kane, Registered Manager, 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, 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 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 stated. The registered provider should confirm that these actions have been completed and return completed QIP to [Estates.Mailbox@rqia.org.uk](mailto: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

### Recommendations

<p><b>Recommendation 1</b></p> <p><b>Ref:</b> Standards 43.1 &amp; 43.2, 44.1 &amp; 44.2</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 28 April 2017</p>	<p>The registered provider should refurbish all existing exterior/interior finishes during the planned extension/alteration works. The refurbishment works scheduled should be completed in accordance with a health and safety risk assessment, ensuring the health, safety and welfare of the patients.</p>
	<p><b>Response by registered provider detailing the actions taken:</b></p> <p>The works are scheduled to start soon and hopes to be completed by early 2017</p>

*\*Please ensure this document is completed in full and returned to [Estates.Mailbox@rqia.org.uk](mailto:Estates.Mailbox@rqia.org.uk) from the authorised email address\**



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