



The Regulation and  
Quality Improvement  
Authority

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**Announced Estates Inspection  
of  
Hamilton Court Nursing Home**

**22 April 2015**

The Regulation and Quality Improvement Authority  
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## **1. Summary of Inspection**

An announced estates inspection took place on 22 April 2015 from 09.45 to 13.15. Overall on the day of the inspection the premises supported the delivery of safe, effective and compassionate care. This inspection was underpinned by the Care Standards for Nursing Homes 2015.

### **1.1 Actions/Enforcement Taken Following the Last Inspection**

Other than those actions 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 was not commenced as a result of the findings of this inspection.

### **1.3 Inspection Outcome**

This inspection resulted in no requirements or recommendations being made. Findings of the inspection can be found in the main body of the report.

## 2. Service Details

<b>Registered Organisation/Registered Person:</b> Four seasons Health Care	<b>Registered Manager:</b> Anthony Edward Hart
<b>Person in Charge of the Home at the Time of Inspection:</b> Anthony Edward Hart	<b>Date Manager Registered:</b> 08 May 2013
<b>Categories of Care:</b> RC-DE & NH-DE	<b>Number of Registered Places:</b> 35
<b>Number of Patients/Residents Accommodated on Day of Inspection:</b> 29	<b>Weekly Tariff at Time of Inspection:</b> <i>£593 per week</i>

## 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 and Grounds

### 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: previous RQIA Estates inspection plus Quality Improvement Plan (QIP) and registered manager QIP response.

During the inspection the inspector met with Mr Gerry Hegarty (Maintenance Manager) and Mr Tony Hart (Manager).

The following records were examined during the inspection:

- Fire detection and alarm system BS5839 inspection certificates;
- Emergency lighting BS5266 inspection certificates;
- Fire extinguisher maintenance inspection certificate;
- Health Technical Memorandum 84 (HTM 84) fire risk assessment;
- Thermostatic Mixing Valve maintenance certificate;
- Legionella risk assessment;
- Electrical Installation periodic inspection report; BS7671 certificate;
- Portable appliance maintenance test certificate (PAT);
- Gas appliance and pipeline “gas safe engineer” annual report;

- Lifting Operations & Lifting Equipment (LOLER) thorough examination reports for patient hoist equipment;
- Local Exhaust Ventilation (LEV) maintenance certificate;
- Emergency Generator provision protocols;
- Space heating boiler maintenance certificate;
- Environmental Health inspection report.

## 5. The Inspection

### 5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the home was an unannounced pharmacy inspection dated 6 October 2014. The completed QIP was returned and approved by the pharmacy inspector on 5 November 2014.

### 5.2 Review of Requirements and Recommendations from *the last* Estates Inspection

Previous Inspection Statutory Requirements		Validation of Compliance
<b>Requirement 1</b>  <b>Ref:</b> Regulations 14.(2)(a)(b) & (c)	Verify that legionella risk assessment recommended control measures are implemented.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Legionella risk assessment control measures implemented.	
<b>Requirement 2</b>  <b>Ref:</b> Regulations 27.(4)(d)(i) & (ii)	Consider BS5839 fire detection and alarm system maintenance engineer report, plan a remedial/improvement works action plan and implement recommended remedial/improvement works.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Fire alarm system maintained in compliance with BS5839.	
Previous Inspection Recommendations		Validation of Compliance
<b>Recommendation 2</b>  <b>Ref:</b> Standard 32.1	Complete a condition survey of all decorated surfaces, plan a redecoration works programme to repair damaged/dilapidated surfaces; implement remedial works action.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Redecoration works completed.	

<b>Recommendation 2</b> Ref: Standard 32.1	Inspect bathroom tiled wall surfaces, repair grout joints and ensure junctions with door architraves are effectively sealed.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Bathroom refurbishment completed.	
<b>Recommendation 3</b> Ref: Standard 32.1	Clean laundry floor, replace floor covering if stains cannot be removed.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Deep cleaning of floor implemented.	
<b>Recommendation 4</b> Ref: Standard 36.2	Implement emergency lighting maintenance engineer BS5266 report recommendations.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Emergency lighting report 09 October 2014 deems system compliant with BS5266.	

### 5.3 Standard 44: Premises and Grounds

#### Is Care Safe? (Quality of Life)

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

#### Is Care Effective? (Quality of Management)

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

#### 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.

#### Areas for Improvement

Not applicable.

<b>Number of Requirements</b>	<b>0</b>	<b>Number Recommendations:</b>	<b>0</b>
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## 5.4 Standard 47: Safe and Healthy Working Practices

### Is Care Safe? (Quality of Life)

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

### Is Care Effective? (Quality of Management)

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

### Is Care Compassionate? (Quality of Care)

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

### Areas for Improvement

Not Applicable.

<b>Number of Requirements</b>	<b>0</b>	<b>Number Recommendations:</b>	<b>0</b>
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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.

### 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.

### 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.

**Areas for Improvement**

Not Applicable.

<b>Number of Requirements</b>	<b>0</b>	<b>Number Recommendations:</b>	<b>0</b>
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**5.6 Additional Areas Examined**

The building interior was refurbished in accordance the Four Seasons Healthcare PEARL project.

The fire risk assessment was completed on 11 September 2014 by an assessor deemed as satisfying the accreditation requirements listed in RQIA correspondence dated 1 April 2015.

**No requirements or recommendations resulted from this inspection.**

<b>I agree with the content of the report.</b>			
<b>Registered Manager</b>	Tony Hart	<b>Date Completed</b>	18.06.15
<b>Registered Person</b>	Dr Claire Royston	<b>Date Approved</b>	19.06.15
<b>RQIA Inspector Assessing Response</b>	<i>Raymond Sayers</i>	<b>Date Approved</b>	<i>15.09.15</i>

Please provide any additional comments or observations you may wish to make below:

*\*Please complete in full and return to RQIA [estates.mailbox@rqia.org.uk](mailto:estates.mailbox@rqia.org.uk) from the authorised email address\**