



**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:	16771
Establishment ID No:	1463
Name of Establishment:	Aughnacloy House
Date of Inspection:	13 May 2014
Inspector's Name:	Raymond Sayers

1.0 GENERAL INFORMATION

Name of Home:	Aughnacloy House
Address:	2 Tandragee Road Lurgan BT66 8TL
Telephone Number:	02838346400
Registered Organisation/Provider:	MD Healthcare Ltd/Mrs Lesley Catherine Megarity
Registered Manager:	Mrs Allison Wylie
Person in Charge of the Home at the time of Inspection:	Mrs Allison Wylie
Other person(s) consulted during inspection:	
Type of establishment:	Nursing Home
Number of Registered Places:	71; A maximum of 33 patients in category NH-DE located on the first floor only. 1 identified person in category NH-LD. The home is also approved to provide care on a day basis only to 4 persons.
Date and time of inspection:	13 May 2014 from 10.00 – 13.30hrs
Date of previous estates inspection:	6 October 2011
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 Mrs Allison Wylie;
- 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 Allison Wylie.

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

Aughnacloy House is a purpose built facility, which has been extended and developed to provide accommodation for persons in need of nursing care. It is situated behind Lurgan Hospital, in close proximity to Lurgan town centre.

Bedroom accommodation is provided in single bedrooms, all of which have an en suite toilet facility. A number of bathrooms and shower rooms are located throughout the home ensuring that bathing/showering facilities are available to meet the needs of patients. There are adequate car parking facilities at the front and rear of the home. The home is registered to provide accommodation for 71 persons. The home is divided into two units; the ground floor unit provides nursing care (NH) for a maximum of 38 patients who require care under the category of NH-I - old age not falling into any other category, NH-PH and NH-PH(E) nursing care for physical disability under and over 65. The first floor unit provides nursing care for a maximum of 32 patients who require care under the categories of NH-DE, dementia, and one patient within the category of NH-LD, learning disability under 65 years of age.

8.0 SUMMARY

Following the Estates Inspection of Aughnacloy House on 13 May 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 36 - Fire Safety.

The inspection resulted in three recommendations, outlined in the quality improvement plan appended to this report.

The building services and fabric were maintained in a good condition, although some minor decorative repairs were noted as requiring attention.

Fire safety risk was well managed; confirmation of fire risk assessor accreditation is recommended.

The Estates Inspector would like to acknowledge the assistance of Mrs Allison Wylie during the inspection process.

9.0 INSPECTOR'S FINDINGS

9.1 Recommendations and requirements from previous inspection

The issues raised in the report of the previous estates inspection on 6 October 2011 have been addressed.

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 interior building fabric however requires some minor attention in order to comply with this standard. Items requiring corrective action by the registered person are detailed in report items 9.2.2 - 9.2.4 and in the attached Quality Improvement Plan section titled '**Standard 32 - Premises and grounds**'.

9.2.2 Ground floor sluice room wall surface finish had deteriorated at low levels adjacent finished floor level due to impact with trolleys etc.
(Reference: Quality Improvement Plan Item 1)

9.2.3 Kitchen corridor wall finish was deteriorating adjacent finished floor level, paint finish was flaking.
(Reference: Quality Improvement Plan Item 1)

9.2.4 Treatment room wall finish was in poor condition as the surface had been damaged by impact with trolleys.
(Reference: Quality Improvement Plan Item 1)

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; no issues have been identified for attention by the registered person.

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. These are detailed in the section of the attached quality improvement plan titled **'Standard 36: Fire safety'**.
- 9.4.2 The last fire risk assessment was completed on 22 April 2014 by Mr Michael Anderson; items on the works action plan have not yet been confirmed as implemented.

The fire risk was evaluated as tolerable. It was not ascertained that the risk assessor accreditation satisfied the recommendations outlined in RQIA communication "Competence of persons carrying out fire risk assessments in regulated residential care establishments", dated 31 January 2013.
(Reference: Quality Improvement Plan Items 2 & 3)

10.0 QUALITY IMPROVEMENT PLAN

The details of the Quality Improvement plan appended to this report were discussed with Mrs Allison Wylie 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**



Quality Improvement Plan sign off sheet for estates inspectors

Name of Home	Aughnacloy House NH
Date of Inspection	13/05/2014
Estates Inspector	R.Sayers

QIP Position Based on Comments from Registered Persons			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.	X	X		R.Sayers	23/06/2014
C.	Clarification or follow up required on some items.					

Estates Inspection – QIP sign off sheet

Informing and Improving Health and Social Care

NOTES:

The details of the quality improvement plan were discussed with Mrs Allison Wylie 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 completed 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	Allison Wylie
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	Lesley Megarity

Announced Estates Inspection to Aughnacloy House Nursing Home on 13 May 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	Standard Reference	Recommendations	Timescale	Details Of Action Taken By Registered Person (S)
1	Standard 32.1	Implement decoration repairs to surfaces damaged as a result of impact with hoists/trolleys etc. (Reference: Report sections 9.2.2 - 9.2.4)	16 weeks	Completed

Standard 36 - Fire Safety

The following requirements and recommendations should be noted for action in relation to Standard 36 - Fire Safety

Item	Standard Reference	Recommendations	Timescale	Details Of Action Taken By Registered Person (S)
2	Standard 36.1	Verify that the fire safety consultant commissioned to review the facility fire risk assessment has professional or third party accreditation as recommended by RQIA guidance document "Competence of persons carrying fire risk assessments in regulated residential care establishments", dated 31 January 2013. (Reference: Report section 9.4.2)	8 Weeks	Fire Risk Assessor is a member of the Institute of Fire Prevention officers and former senior Fire Officer.
3	Standard 36.1	Verify that fire risk assessment report recommendations are either implemented or prioritized for works action. (Reference: Report section 9.4.2)	8 weeks	Completed.

Announced Estates Inspection to Aughnacloy House Nursing Home on 13 May 2014

Assurance, Challenge and Improvement in Health and Social Care