



The Regulation and
Quality Improvement
Authority

**THE REGULATION AND QUALITY IMPROVEMENT
AUTHORITY**

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ANNOUNCED ESTATES INSPECTION

Inspection No:	IN016774
Establishment ID No:	1468
Name of Establishment:	Dungannon
Date of Inspection:	7 October 2014
Inspector's Name:	Raymond Sayers

1.0 GENERAL INFORMATION

Name of Home:	Dungannon
Address:	100 Killyman Rd Dungannon BT71 6DQ
Telephone Number:	028 87753034
Registered Organisation/Provider:	Four Seasons Health Care/Mr James McCall
Registered Manager:	Ms Rochelle Conde (Acting Manager)
Person in Charge of the Home at the time of Inspection:	Ms Rochelle Conde (Acting Manager)
Other person(s) consulted during inspection:	Mr Gerry Heagarty, Four Seasons Health Care Maintenance Manager & Mr Ivan Conly (Maintenance Operative)
Type of establishment:	Nursing Home
Number of Registered Places:	36
Date and time of inspection:	7 October 2014 from 09.35 – 12.30hrs
Date of previous estates inspection:	15 December 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 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 Ms Rochelle Conde (Acting Manager) and Mr Gerry Hegarty.

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

Dungannon Care Home is located centrally to Dungannon and comprises of 36 single bedrooms, four large sitting rooms, a number of quiet rooms, three dining rooms, multisensory room, hairdressing room, toilet/washing facilities, kitchen, laundry, staff accommodation and offices.

An enclosed garden area is available in the grounds of the home.

The home provides nursing care for adults with a learning disability.

8.0 SUMMARY

Following the Estates Inspection of Dungannon on 7 October 2014 improvements are required to comply with the Nursing Homes Regulations (Northern Ireland) 2005 and the criteria 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 three recommendations, listed in the quality improvement plan appended to this report.

The building fabric and services are maintained in compliance with good practice, decorative standards are good.

The Estates Inspector would like to acknowledge the assistance of Ms Rochelle Conde (Acting Manager) and Mr Gerry Hegarty during the inspection process.

9.0 INSPECTOR'S FINDINGS

9.1 Recommendations and requirements from previous inspection

It is noted that the issues raised in the report of the previous estates inspection on 15 December 2011 have been addressed.

No	Regulation Ref.	Requirements	Action taken - as confirmed during this inspection	Inspector's Comments
1	14(2)	Confirm that arrangements are currently in place to safeguard the health, safety and welfare of all residents during or as a result of any potential electrical power failures	Contingency plans in place to provide home with temporary generator, if required.	compliant
2	14(2)	Confirm that Gas safe Register report recommendations have been implemented.	Laundry gas appliances secured to wall.	compliant

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 building and engineering services however require some attention in order to comply with this standard. Items requiring corrective action by the registered person are detailed in report items 9.2.2 - 9.2.3. Requirements and recommendations are listed in the attached Quality Improvement Plan section titled '**Standard 32 - Premises and grounds**'.
- 9.2.2 The Treatment room Low Surface Temperature radiator had sustained some surface corrosion.
(Reference: Quality Improvement Plan Item 1)
- 9.2.3 Assisted shower room 2 had a defective floor covering welded joint.
(Reference: Quality Improvement Plan Item 2)

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, although some issues have been identified for attention by the registered person. Items requiring corrective/improvement action are detailed in report items 9.3.2- 9.3.3 and in the attached Quality Improvement Plan section titled '**Standard 35 - Safe and healthy working practices**'.
- 9.3.2 The legionella risk assessment was scheduled for a review in April 2014; a review of the legionella risk assessment report was not presented for examination.
(Reference: Quality Improvement Plan Item 3)
- 9.3.3 Sluice rooms do not contain separate wash-hand basins; this is contrary to infection control good practice.
(Reference: Quality Improvement Plan Item 4)

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 in the home are compliant with this standard. Records inspected demonstrate good attention to fire safety matters. There is however one issue which needs to be addressed, and is detailed in report paragraph 9.4.3. A requirement is listed in the section of the attached quality improvement plan titled '**Standard 36: Fire safety**'.
- 9.4.2 A fire risk assessment was completed by Mr Jonathan McCleery on 19 May 2014. Mr McCleery is currently expecting to attain accredited status for the completion of fire risk assessments in regulated residential premises, as recommended by the RQIA.
- 9.4.3 The fire detection and alarm maintenance engineer recommended an upgrade of the fire alarm panel.
(Reference: Quality Improvement Plan Item 5)

10.0 QUALITY IMPROVEMENT PLAN

The details of the Quality Improvement plan appended to this report were discussed with Ms Rochelle Conde (Acting Manager) 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 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

Announced Estates Inspection

Dungannon Nursing Home, RQIA ID 1468

7 October 2014

QIP Position Based on Comments from Registered Persons (for RQIA use only)			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.					
C.	Clarification or follow up required on some items.					

NOTES:

The details of the quality improvement plan were discussed with Ms Rochelle Conde (Acting Manager) and Mr Gerry Hegarty during the inspection process.

The timescales commence from the date of inspection.

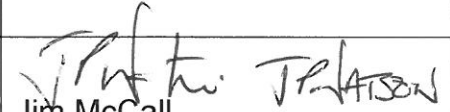
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Recommendations are based on the Department of Health, Social Services and Public Safety's minimum standards for registration and inspection, promote current good practice and should be considered by the management of the home to improve the quality 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	Rochelle Conde
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	 Jim McCall DIRECTOR OF OPERATIONS 10/12/14

Announced Estates Inspection to Dungannon Nursing Home on 7 October 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	Remove corrosion from Treatment room low surface temperature radiator cover and apply protective finish. (Reference: Report paragraph 9.2.2)	8 weeks	Protective finish applied and removal of corrosion from Treatment room low surface temperature radiator cover was done.
2	Standard 32.1	Repair assisted shower room 2 floor covering defective weld joint. (Reference: Report paragraph 9.2.3)	8 weeks	Repair of assisted shower room 2 floor covering defective weld joint has commenced..

Announced Estates Inspection to Dungannon Nursing Home on 7 October 2014

Assurance, Challenge and Improvement in Health and Social Care

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	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
3	Regulations 14(2)(a),(b) & (c)	Complete a review of the facility legionella risk assessment and implement recommended control measures. (Reference: Report paragraph 9.3.2)	12 weeks	completed
Item	Standard Reference	Recommendations	Timescale	Details Of Action Taken By Registered Person (S)
4	Standard 35.1	Install wash-hand basins in sluice rooms in accordance with infection control good practice. (Reference: Report paragraph 9.3.3)	26 weeks	To be reviewed.

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Assurance, Challenge and Improvement in Health and Social Care

Standard 36 - Fire Safety

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

Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
5	Regulations 27.(4)(d),(i),(ii) & (v)	Review and evaluate the BS5839 fire detection and alarm system engineer's inspection report recommendation to upgrade the fire alarm panel; implement precautions to ensure that the fire alarm system remains in a satisfactory condition prior to any upgrade. (Reference: Report paragraph 9.4.3)	immediate	Fire alarm testing is done twice weekly.

Announced Estates Inspection to Dungannon Nursing Home on 7 October 2014

Assurance, Challenge and Improvement in Health and Social Care