

Chestnut Lodge RQIA ID: 1479 47 Carrickanesss Road Benburb BT71 7NH

Inspector: Raymond Sayers Inspection ID: IN021533

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Announced Estates Inspection of Chestnut Lodge Nursing Home

03 June 2015

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
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1. Summary of Inspection

An announced estates inspection took place on 03 June 2015 from 10.00am to 13.30pm. Overall on the day of the inspection the premises supported the delivery of safe, effective and compassionate care. Areas for improvement were identified and are set out in the Quality Improvement Plan (QIP) appended to this report. This inspection was underpinned by the Care Standards for Nursing Homes 2015.

1.1 Actions/Enforcement Taken Following the Last Inspection

Other than those items 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 did not result from the findings of this inspection.

1.3 Inspection Outcome

	Requirements	Recommendations
Total number of requirements and	2	2
recommendations made at this inspection	_	_

The details of the QIP within this report were discussed with Mr Paul Gildernew and Mr Gerry Hegarty (Four Seasons Health Care Maintenance Supervisor) during the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Organisation/Registered Person: Four Seasons Health Care/ Mr James McCall	Registered Manager: Mr Paul Gildernew
Person in Charge of the Home at the Time of Inspection: Mr Paul Gildernew	Date Manager Registered: 03 July 2012
Categories of Care: RC-MP(E), NH-PH, RC-I, RC-MP, NH-I, NH-DE	Number of Registered Places: 40
Number of patients/residents Accommodated on Day of Inspection: 31	Weekly Tariff at Time of Inspection: £528-637

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

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 estates inspection report and statutory notifications over the past 12 month period.

During the inspection the inspector met with Mr Gerry Hegarty (Four Seasons Maintenance Supervisor) and Mr Paul Gildernew (Manager).

The following records were examined during the inspection:

- Fire safety risk assessment plus records relating to the maintenance and inspection of the fire safety equipment;
- Legionella risk assessment plus records relating to the maintenance and inspection of the water storage and distribution services;
- Records relating to the maintenance and inspection of the building engineering services;
- Records relating to Lifting Operations and Lifting Equipment maintenance/inspection control measures;
- Records relating to general health and safety control measures/inspections.

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the home was an unannounced pharmacy inspection, IN018463 dated 24 February 2015. The completed QIP was returned, and approved by the pharmacy inspector on 24 March 2015.

5.2 Review of Requirements and Recommendations from the last Estates Inspection

Previous Inspection	Validation of Compliance	
Requirement 1 Ref: Regulation 27.(2)(b)	Complete a condition survey of all interior and exterior surfaces, implement cleaning/redecoration of deteriorated/damaged surfaces. Action taken as confirmed during the	Met
	inspection: Redecoration completed in 2014, works currently ongoing	
Requirement 2 Ref: Regulations 14.(2),(a),(b) and (c)	Verify that all electrical appliances are inspected and tested in compliance with Health and safety Executive guidance document `Maintaining Portable and Transportable Electrical Equipment` (HSG 107, INDG 236 and 237) Action taken as confirmed during the inspection:	Met
	Portable Appliance testing completed.	
Requirement 3 Ref: Regulation 27.(4)(a)	Verify that the fire risk assessment report recommendations are either implemented or prioritised and scheduled for works action.	Met
	Works implemented; risk assessment completed 19 May 2014.	

Previous Inspection Recommendations		Validation of Compliance
Recommendation 1 Ref: Standard 35.1	Implement corrective works noted on 12 June 2014 Lifting Operations and Lifting Equipment Regulations `thorough examination report`.	N-4
	Action taken as confirmed during the inspection: Lifting Operations and Lifting Equipment Regulations thorough examinations last completed 16 April 2015.	Met
Recommendation 2	It is recommended that the annual review of the fire risk assessment should be carried out by a person	
Ref: Standard 36.1	or a company certified by a third party UKAS accredited certification body or a person who is registered with one of the fire safety professional bodies. Reference should be made to correspondence issued by RQIA to all registered persons on 13 January 2013 and the following guidance contained therein: http://www.rqia.org.uk/cms_resources/Competence%20of%20persons%20carrying%20out%20Fire%2ORisk%20Assessment.pdf Action taken as confirmed during the inspection: Fire Risk Assessment completed by an accredited fire risk assessor.	Met

5.3 Standard 44: Premises

Is Care Safe? (Quality of Life)

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

[An issue was however identified for attention during this Estates inspection, and is detailed in the 'areas for improvement' section below.]

Is Care Effective? (Quality of Management)

A range of accommodation, facilities and support services are 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

First floor corridor wall surfaces had sustained wear and tear damage; decorative finishes are in need of renewal.

Grounds maintenance weed control work had not been completed in the rear courtyard; weed growth covered a significant percentage of the ground surfaces.

Number of Requirements	1	Number Recommendations:	1	ı
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5.4 Standard 47: Safe and Healthy Working Practices

Is Care Safe? (Quality of Life)

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

[An issue was however identified for attention during this Estates inspection, and is detailed in the 'areas for improvement' section below.]

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

Lifting Operations and Lifting Equipment (LOLER) thorough examination report recommended that the passenger lift is subjected to a risk assessment to evaluate safety standards in accordance with EN81-80.

Carbon monoxide monitors/alarms were not present in the gas boiler rooms.

Number of Requirements	1	Number Recommendations:	1

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 person 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.

Number of Requirements	0	Number Recommendations:	0

5.6 Additional Areas Examined

Not applicable.

6. Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Mr Gerry Hegarty (Maintenance Supervisor) and Mr Paul Gildernew (Manager) during the inspection process. The timescales commence from the date of inspection.

The registered person/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 person/manager 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 your premises. 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.

6.1 Statutory Requirements

This section outlines the actions which must be taken so that the registered person/s meets legislative requirements based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, Nursing Homes Regulations (Northern Ireland) 2005.

6.2 Recommendations

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

6.3 Actions Taken by the Registered Persons

The QIP should be completed by the registered manager to detail the actions taken to meet the legislative requirements stated. The registered person will review and approve the QIP to confirm that these actions have been completed by the registered manager. Once fully completed, the QIP will be returned to estates.mailbox@rqia.org.uk and assessed by the inspector.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the home. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not absolve the registered person/manager from their responsibility for maintaining compliance with minimum standards and regulations. It is expected that the requirements and recommendations set out in this report will provide the registered person/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the home.

Quality Improvement Plan		
Statutory Requirements	s .	
Requirement 1 Ref: Regulation 14.(2)(a),(b) and (c)	Lifting Operations and Lifting Equipment Regulations (LOLER) thorough examination report dated 16 April 2015 must be assessed and recommended control measures implemented.	
Stated: First time	Response by Registered Manager Detailing the Actions Taken:	
To be Completed by: 29 July 2015		
Requirement 2	Redecorate first floor corridors wall surfaces.	
Ref: Regulation 27.(2)(d)	Response by Registered Manager Detailing the Actions Taken:	
Stated: First time		
To be Completed by: 26 August 2015		
Recommendations		
Recommendation 1 Ref: Standard 43.11	Eliminate weed growth from rear courtyard surfaces and consider upgrading the courtyard to provide an external activity/day space area.	
Stated: First time	Response by Registered Manager Detailing the Actions Taken:	
To be Completed by: 29 July 2015		
Recommendation 2	Install carbon monoxide monitor/alarms in gas boiler rooms.	
Ref : Standards 47.1, 47.2 and 47.3	Response by Registered Manager Detailing the Actions Taken:	
Stated: First time		
To be Completed by: 29 July 2015		

Registered Manager Completing QIP	Date Completed
Registered Person Approving QIP	Date Approved
RQIA Inspector Assessing Response	Date Approved

^{*}Please ensure the QIP is completed in full and returned to estates.mailbox@rqia.org.uk from the authorised email address*



A completed Quality Improvement Plan from the inspection of this service is not currently available. However, it is anticipated that it will be available soon.

If you have any further enquiries regarding this report please contact RQIA through the e-mail address info@rqia.org.uk