

Announced Premises Inspection Report 21 JULY 2016



Dunlarg Care Home

Type of Service: Nursing
Address: 224 Keady Road, Armagh, BT60 3EW
Tel No: 028 3753 0858
Inspector: R. Sayers

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

1.0 Summary

An announced premises inspection of Dunlarg Care Home took place on 21 July 2016 from 10.00 to 13.30hrs.

Is care safe?

On the day of the inspection the premises supported the delivery of safe care. Some issues were however identified for attention by the registered person. 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
Total number of requirements and recommendations made at this inspection	0	3

Details of the Quality Improvement Plan (QIP) within this report were discussed with Ms Patricia Graham, Registered Manager, and Mr Gerry Hegarty, Four Seasons Maintenance Manager as part of the inspection process. The timescales for completion commence from the date of inspection.

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

1.2 Actions/enforcement taken following the most recent premises inspection

Other than those items detailed in the previous QIP there were no further actions required to be taken following the last inspection.

2.0 Service Details

Registered organisation/registered provider: Four Seasons (Bamford) Ltd	Registered manager: Patricia Graham
Person in charge of the home at the time of inspection: Patricia Graham	Date manager registered: 30 May 2012
Categories of care: RC-I, RC-MP(E), NH-LD, NH-PH, NH-PH(E), NH-DE, NH-I	Number of registered places: 58

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 Ms Patricia Graham, Registered Manager, Mr Gerry Hegarty, Four Seasons Maintenance Manager, laundry and kitchen staff. Two patients expressed satisfaction with the condition of the environment during the inspection.

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 28/06/2016

The most recent inspection of the home was an unannounced care inspection. The completed QIP was returned and approved by the specialist 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 07/10/2014

Last Premises inspection statutory requirements		Validation of compliance
Requirement 1 Ref: Regulation 27 (2)(b) Stated: First time	Verify that an internal refurbishment project is planned for 2015; all finishes should be inspected prior to drafting of the works specification. Submit a copy of the works proposal schedule to RQIA estates inspector.	Met
	Action taken as confirmed during the inspection: Internal finishes renewed.	
Last Premises inspection recommendations		Validation of compliance
Recommendation 1 Ref: Standard 32.1 Stated: First time	Repair/replace shower rooms defective floor coverings.	Met
	Action taken as confirmed during the inspection: Defective floor coverings replaced.	
Recommendation 2 Ref: Standard 32.1 Stated: First time	Complete an inspection of all bedroom vanity units, prepare a planned prioritised repair/replacement works project and implement planned corrective works.	Met
	Action taken as confirmed during the inspection: Refurbishment programme implemented and ongoing.	

<p>Recommendation 3</p> <p>Ref: Standard 36</p> <p>Stated: First time</p>	<p>It is recommended that the annual reviews of the fire risk assessment should be carried out by a person 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:</p> <p>http://www.rqia.org.uk/cms/resources/Competence%20of%20persons%20carrying%20out%20Fire%20Risk%20Assessment.pdf</p>	<p>Met</p>
	<p>Action taken as confirmed during the inspection:</p> <p>Risk assessment completed by accredited risk assessor.</p>	

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.

Documents relating to the safe operation of the premises, installations and engineering services were 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.

A number of issues were however identified for attention during this inspection, and are listed in the areas for improvement section below.

Areas for improvement

1. Legionella control temperature monitoring of the hot water storage and distribution system temperatures indicated that hot water “return” temperatures were not reaching 55 degrees Centigrade. Mr Hegarty stated that temperature gauges would be installed at the calorifiers to ensure accurate temperature monitoring.

Refer to Quality Improvement Plan recommendation 1.

2. The Gas Safe Register engineer inspection of the gas service installation recommended some improvement works:
 - kitchen pipework support;
 - new regulator & improved ventilation.

Refer to Quality Improvement Plan recommendation 2.

Number of requirements	0	Number of recommendations:	2
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4.4 Is care effective?

There are arrangements in place for routine premises management plus emergency breakdown repairs. Service users are involved, where appropriate in decisions around the redecoration and maintenance of the premises; this supports the delivery of effective care.

An issue was however identified for attention during this premises inspection, and is detailed in the ‘areas for improvement’ section below.

Areas for improvement

1. In some areas the corridor carpet floor finish has become faded due to exposure to sunlight.

Refer to Quality Improvement Plan recommendation 3.

Number of requirements	0	Number of recommendations:	1
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4.5 Is care compassionate?

The accommodation reviewed during this premises inspection was well presented, comfortable, clean, free from malodours, with adequate lighting levels.

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

This supports the delivery of compassionate care.

Number of requirements	0	Number of recommendations:	0
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4.6 Is the service well led?

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

Number of requirements	0	Number of recommendations:	0
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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 Patricia Graham, 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 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>Recommendation 1</p> <p>Ref: Standards 47.1 & 47.2</p> <p>Stated: First time</p> <p>To be completed by: 13 October 2016</p>	<p>The registered provider should consider the installation of temperature gauges on calorifiers to permit accurate temperature monitoring of the hot water storage and distribution system.</p> <p>Response by registered provider detailing the actions taken: Installation of temperature gauges on calorifiers is scheduled for 9th September 2016.</p>
<p>Recommendation 2</p> <p>Ref: Standard 47.1</p> <p>Stated: First time</p> <p>To be completed by: 15 September 2016</p>	<p>The registered provider should assess the Gas Safe Register engineers report recommendations and implement a prioritised improvement works action plan.</p> <p>Response by registered provider detailing the actions taken: The engineers report has been reviewed, an action plan is completed clearly indicating prioritised works. Registered manager will monitor progress of action plan and liaise with Property Manager as required.</p>
<p>Recommendation 3</p> <p>Ref: Standard 43.2</p> <p>Stated: First time</p> <p>To be completed by: 21 July 2017</p>	<p>The registered provider should complete a condition survey of the corridor carpet floor covering, replacing flooring where necessary.</p> <p>Response by registered provider detailing the actions taken: Professional cleaning of corridor carpets is arranged and following this Registered Manager will reassess condition of carpets and should replacement be required costing will be requested.</p>

Please ensure this document is completed in full and returned to Estates.Mailbox@rqia.org.uk from the authorised email address



The Regulation and Quality Improvement Authority

9th Floor

Riverside Tower

5 Lanyon Place

BELFAST

BT1 3BT

Tel 028 9051 7500

Fax 028 9051 7501

Email info@rqia.org.uk

Web www.rqia.org.uk

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