

**Announced Estates Inspection
of
Lisnisky**

25 February 2016

1. Summary of Inspection

An announced estates inspection took place on 25 February 2016 from 09.55am to 12.30pm. 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 recommendations made at this inspection	0	1

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

2. Service Details

Registered Organisation/Registered Person: Four Seasons Health Care Limited/Ms Maureen Claire Royston	Registered Manager: Mrs Edith Harrison
Person in Charge of the Home at the Time of Inspection: Julie Velasco (Assistant Manager)	Date Manager Registered: September 2008
Categories of Care: NH-DE, RC-I, RC-MP(E), RC-PH, RC-LD(E), NH-I, NH-TI	Number of Registered Places: 63
Number of Patients Accommodated on Day of Inspection: 62	Weekly Tariff at Time of Inspection: <i>Trust rates</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 and 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's period.

During the inspection the inspector met with Mr Gerry Hegarty.

The following records were examined during the inspection: Copies of building services maintenance certificates, building user log books relating to the maintenance and inspection of the premises, legionellae risk assessment and fire risk assessment.

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the home was an unannounced care inspection dated 23 October 2015, reference IN023798. The completed QIP was returned, and reviewed by the care inspector on 25 December 2015.

5.2 Review of Requirements and Recommendations from the last Estates Inspection

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulation 27.(4)(a)	Implement fire risk assessment recommended repair/improvement works actions.	Met
	Action taken as confirmed during the inspection: Recommended improvements implemented.	
Previous Inspection Recommendations		Validation of Compliance
Requirement 2 Ref: Regulation 27.(4)(d)(iii)	Assess emergency lighting 24 July 2013 B5266 maintenance inspection report and implement prioritized corrective/improvement works.	Met
	Action taken as confirmed during the inspection: Recommended improvements implemented.	
Previous Inspection Recommendations		Validation of Compliance
Recommendation 1 Ref: Standard 32.1	Complete a decoration condition survey and implement a planned redecoration works programme, including installation of surface protective measure where deemed appropriate.	Met
	Action taken as confirmed during the inspection: Repair works completed.	
Recommendation 2 Ref: Standard 35.1	Complete a survey of all car park/driveway road surfaces; where required implement repair works to ensure gulley frame/grid does not extend above adjacent surfaces.	Met
	Action taken as confirmed during the inspection: Repair works completed.	

5.3 Standard 44: Premises

Is Care Safe? (Quality of Life)

A range of documents related to the maintenance and inspection of the premises were 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.

[There were no issues identified for attention during this Estates inspection.]

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.

[There were no issues identified for attention during this Estates inspection.]

Is Care Compassionate? (Quality of Care)

The accommodation reviewed during this Estates inspection was well presented, clean and free from malodours. This supports the delivery of compassionate care.

[There were no issues identified for attention during this Estates inspection.]

Areas for Improvement

A bathroom refurbishment scheme is currently in progress; this is expected to be completed within six weeks.

Number of Requirements	0	Number Recommendations:	0
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5.4 Standard 47: Safe and Healthy Working Practices

Is Care Safe? (Quality of Life)

A range of documents related 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.

[There were no issues identified for attention during this Estates inspection.]

Is Care Effective? (Quality of Management)

The dependency 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.

[There were no issues identified for attention during this Estates inspection.]

Is Care Compassionate? (Quality of Care)

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

[There were no issues identified for attention during this Estates inspection.]

Areas for Improvement

None identified.

Number of Requirements	0	Number Recommendations:	0
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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. The fire risk assessment has been completed by an accredited fire risk assessor. This supports the delivery of safe care.

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

Is Care Effective? (Quality of Management)

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. This supports the delivery of effective care.

[There were no issues identified for attention during this Estates inspection.]

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.

[There were no issues identified for attention during this Estates inspection.]

Areas for Improvement

1. The 10 June 2015 fire risk assessment action plan has not been fully implemented; the maintenance supervisor confirmed that the recommended improvements were prioritised and would be included in future planned works.
Refer to Quality Improvement Plan Recommendation 1

Number of Requirements	0	Number Recommendations:	1
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5.6 Additional Areas Examined

None identified.

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 (Four Seasons Health Care, Maintenance Supervisor) as part of 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			
Recommendations			
Recommendation 1 Ref: Standard 48.1 Stated: First time To be Completed by: In accordance with fire risk assessment report timescales	Implement planned prioritised works to implement the 10 June 2015 fire risk assessment report recommendations.		
	Response by Registered Manager Detailing the Actions Taken: Fire Risk Assessor carried out a review and is happy for the one remaining item to be reviewed at the next Fire Risk Assessment in June 2016.		
Registered Manager Completing QIP	Edith Harrison	Date Completed	01.04.2016
Registered Person Approving QIP	Dr Claire Royston	Date Approved	05.04.16
RQIA Inspector Assessing Response	Raymond Sayers	Date Approved	15/04/16

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