

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: IN021032

Establishment ID No: 1493

Name of Establishment: Our Mother of Mercy Nursing Home, Newry

Date of Inspection: 02 December 2014

Inspector's Name: K. Monaghan

1.0 GENERAL INFORMATION

Name of Home:	Our Mother of Mercy Nursing Home			
Address:	1 Home Avenue Newry BT34 2DL			
Telephone Number:	(028) 30 26 20 86			
Registered Organisation/Provider:	Mercy Care Ltd (Mrs. Peggy O'Neill, Managing Director)			
Registered Manager:	Mrs. Elizabeth Doran			
Person in Charge of the Home at the time of Inspection:	Mrs. Elizabeth Doran, Registered Manager			
Other Person(s) Consulted During the Inspection:	Mr. Frances. O'Hare who is responsible for ongoing maintenance works in the home and Mr. Robert Watters who carries out the cleaning and disinfection of the plumbing systems in the home.			
Categories of Care:	NH-I, NH-PH, NH-PH(E), RC-I, RC-MP, RC- MP(E), NH-LD, NH-LD(E)			
Number of Registered Places:	48			
Date of previous Estates inspection:	10 December 2013			
Date and time of inspection:	02 December 2014 (2:30pm. – 3:45pm.)			
Name of Inspector:	K. Monaghan			

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 and
- 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:

- 1. Discussions with Mrs. E. Doran, Mr. F. O'Hare and Mr. R. Watters.
- 2. Examination of records relating to the arrangements in place for the prevention or control of legionella bacteria in the water systems,
- 3. A review of the roof space area where the cold water storage tanks are located. The wash basins in shower room 46 on the second floor, in the bedroom adjacent to shower room 46 on the second floor and in toilet 16 on the ground floor were also reviewed during this Estates inspection.
- 4. 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. E. Doran, Mr. F. O'Hare and Mr. R. Watters.

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 35 - Safe and healthy working practices

This Estates inspection focused specifically on the arrangements in place in relation to the prevention or control of legionella bacteria in the water systems.

7.0 PROFILE OF SERVICE

Our Mother of Mercy Nursing and Residential Home was initially registered in 1989. The home provides care for a maximum of 48 persons assessed as requiring nursing or residential care, and when beds are available also provides respite care.

The facility is a three-story building which is located on the outskirts of Newry City and bedroom accommodation is comprised of single and shared bedrooms. There are three sitting rooms, an oratory, dining room, kitchen, laundry, toilet/washing facilities, staff accommodation and offices. There is a garden to the front of the home.

Car parking is available within the home grounds.

8.0 SUMMARY

Following the Estates Inspection of Our Mother of Mercy Nursing Home on 02 December 2014, improvements are required to comply with the Nursing Homes Regulations (Northern Ireland) 2005 and the criteria outlined in the following standards:

• Standard 35 - Safe and healthy working practices

This resulted in two requirements. These are outlined in the quality improvement plan appended to this report.

The Estates Inspector would like to acknowledge the assistance of Mrs. E. Doran, Mr. F. O'Hare and Mr. R. Watters throughout the inspection process.

9.0 INSPECTION FINDINGS

9.1 Recommendations and requirements from previous Estates inspection 10 December 2013

9.1.1 This Estates inspection focused specifically on the arrangements in place for the prevention or control of legionella bacteria in the water systems. The issues included in the Quality Improvement Plan for the previous Estates inspection that was carried out on 10 December 2013 were not therefore reviewed during this visit. These issues were followed up separately by RQIA.

9.2 Standard 35 - Safe and healthy working practices

'The home is maintained in a safe manner'

- 9.2.1 This Estates inspection was carried out to review the arrangements in place in relation to the prevention or control of legionella bacteria in the water systems. The following issues should be noted in this regard:
- 9.2.2 A risk assessment for the prevention or control of legionella bacteria in the water systems was carried out by a specialist company in June 2014. The report for this risk assessment was presented for review during this Estates inspection. This report identified a number of issues for attention in the recommendation section. These issues had been addressed with the exception of the completion of the next servicing of the thermostatic mixers. Mrs. Doran confirmed that the plumber had been contacted in relation to this work and arrangements were being made for completion of same as soon as possible. Subsequent to this Estates inspection, this work was completed and a copy of the report was forwarded to RQIA. Mrs. Doran also provided confirmation that this work included inspection and cleaning, including cleaning of the strainers as required.
- 9.2.3 In view of the fact that the results for some of the water samples that were tested indicated the presence of legionella bacteria, the risk assessment should be reviewed again. Subsequent to this Estates inspection Mrs. Doran confirmed to RQIA that the legionella risk assessment had been reviewed again with a satisfactory outcome.

9.0 INSPECTION FINDINGS CONTINUED

9.2 Standard 35 - Safe and healthy working practices continued

- 9.2.4 A schematic drawing for the water systems in the premises was not presented for review during this Estates inspection. A schematic drawing for the water systems should be available in the home for review during future inspections. This drawing should detail the critical information in relation to the water systems including the clear identification of the sentinel water outlets for the unblended hot water and the cold water. Reference should be made to item 1 in the attached Quality Improvement Plan.
- 9.2.5 Water samples had been tested on a regular basis over the previous twelve months. The results for these tests indicated the presence of legionella bacteria in a number of the samples. Following receipt of the most recent sample test results which indicated the presence of legionella bacteria at one outlet, the system was chlorinated. This is in line with current guidance. This chlorination was completed on 11 November 2014. Arrangements were being made to carry out further sampling of the water system following this chlorination. Before this further sampling is carried out the Legionella Risk Assessor should be consulted for advice in relation to how and the extent of sampling that should be carried out. Reference should also be made to the guidance contained in 'British Standard 7592 Sampling for legionella organisms in water and related materials'. The location references for any further water samples should be standardised and made clear so that it is easy to identify the patterns in the test results. Subsequent to this Estates inspection RQIA received confirmation from Mrs. Doran that the legionella risk assessor had been consulted in relation to the re-sampling. The results for the further sampling should be confirmed to RQIA. Reference should be made to item 1 in the attached Quality Improvement Plan.
- 9.2.6 An emersion type thermometer was available in the home for the ongoing checking of the water temperatures. In addition to this thermometer a surface type thermometer should also be obtained to facilitate checking the unblended hot water temperatures where blending devices and/or thermostatic mixers have been installed. Reference should be made to item 2 in the attached Quality Improvement Plan.

9.0 INSPECTION FINDINGS CONTINUED

9.2 Standard 35 - Safe and healthy working practices continued

- 9.2.7 There was a procedure in place for cleaning and disinfecting the showers on a monthly basis. A record for this activity was presented for review during this Estates inspection. This indicated that the showers had been cleaned and disinfected on 18 September 2014, 03 October 2014 and 07 November 2014. A written procedure for this activity should be included with the record re same. Subsequent to this Estates inspection RQIA received confirmation from Mrs. Doran that this issue had been addressed.
- 9.2.8 One outlet was not in frequent use. This was flushed on 28 November 2014 and 02 December 2014. There was also a procedure in place for checking the water temperatures on a monthly basis. Although this frequency is in line with the current guidance, it may be beneficial in increase the checks at the sentinel outlets for the unblended hot water and cold water outlets to weekly until the results for the further water sample testing are known. Reference should be made to item 2 in the attached Quality Improvement Plan.
- 9.2.9 The area of the roof space where the cold water storage tanks are located was reviewed during this Estates inspection. The purpose for the small galvanised water tank in the roof space should be identified. Subsequent to this Estates inspection RQIA received confirmation from Mrs. Doran that this tank had been checked and that it was for the heating system.
- 9.2.10 The above issues where appropriate are detailed in the section of the attached quality improvement plan entitled '**Standard 35 Safe and healthy working practices.**

10.0 QUALITY IMPROVEMENT PLAN

The details of the Quality Improvement plan appended to this report were discussed with, Mrs. E. Doran, Mr. F. O'Hare and Mr. R. Watters, 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 nursing home to improve the quality of life experienced by patients.

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 estates@rgia.org.uk.



QUALITY IMPROVEMENT PLAN

ANNOUNCED ESTATES INSPECTION IN021032

OUR MOTHER OF MERCY NURSING HOME, NEWRY RQIA ID 1493

02 DECEMBER 2014

	QIP Position Based on Comments from Registered Persons		QIP Closed		Estates Officer	Date
			Yes	No		
A.	All items confirmed as addressed.	-	_	_	_	_
В.	All items either confirmed as addressed or arrangements confirmed to address within stated timescales.	-	-	_	_	_
C.	Clarification or follow up required on some items.	\checkmark		\checkmark	K. Monaghan	21 January 2015

NOTES:

The details of the quality improvement plan were discussed with Mrs. Elizabeth Doran, Registered Manager, Mr. Frances. O'Hare who is responsible for ongoing maintenance works in the home and Mr. Robert Watters who carries out the cleaning and disinfection of the plumbing systems in the home, 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 nursing 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 signed below by the registered provider and registered manager and returned to:

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	ELIZABETH DORAN		
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	PEGGY O'NEILL		

Announced Estates Inspection IN021032 - 02 December 2014 Our Mother of Mercy Nursing Home, Newry RQIA ID 1493

Assurance, Challenge, Improvement in Health and Social Care

Safe and healthy working practices

The following requirements should be noted for action in relation to Standard 35 - Safe and healthy working practices:

ltem	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
1.	Regulations 13(7) 14(2)(a) 14(2)(c) 27(2)(q)	A schematic drawing for the water systems should be available in the home for review during future inspections. This drawing should detail the critical information in relation to the water systems including the clear identification of the sentinel water outlets for the unblended hot water and the cold water. The results for the further sampling should be confirmed to RQIA Reference should be made to sections 9.2.4 and 9.2.5 in the report.	1 Month	 A schematic drawing is available in the home for future inspections. This has detailed all the critical information required. Results of the recent water samplings shows legionella still present in samples. Work outlined in the recent Water Risk Assessment is well in progress. Further samples will be sent out mid-February for analysis and RQIA will be kept informed.

Announced Estates Inspection IN021032 - 02 December 2014 Our Mother of Mercy Nursing Home, Newry RQIA ID 1493

Assurance, Challenge, Improvement in Health and Social Care

Safe and healthy working practices continued

The following requirements should be noted for action in relation to Standard 35 - Safe and healthy working practices:

ltem	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
2.	Regulations 13(7) 14(2)(a) 14(2)(c) 27(2)(q)	In addition to the emersion thermometer, a surface type thermometer should be obtained to facilitate checking the unblended hot water temperatures where blending devices and/or thermostatic mixers have been installed. Consideration should also be given to increasing the checks at the sentinel outlets for the unblended hot water and the cold water outlets to weekly until the results for the further water sample testing are known. Reference should be made to sections 9.2.6 and 9.2.8 in the report.	1 Month & Ongoing	A surface type thermometer has been obtained. Checks have been increased to weekly and will remain in place until all work advised by plumber has been completed, further samples have been taken and results known.

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Assurance, Challenge, Improvement in Health and Social Care