



The Regulation and  
Quality Improvement  
Authority

**THE REGULATION AND QUALITY IMPROVEMENT  
AUTHORITY**

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**ANNOUNCED ESTATES INSPECTION**

**Inspection No:** IN021182  
**Establishment ID No:** 1493  
**Name of Establishment:** Our Mother of Mercy Nursing Home, Newry  
**Date of Inspection:** 29 January 2015  
**Inspector's Name:** K. Monaghan

## 1.0 GENERAL INFORMATION

|  |  |
|--|--|
| <b>Name of Home:</b>   | Our Mother of Mercy Nursing Home   |
| <b>Address:</b>  | 1 Home Avenue<br>Newry<br>BT34 2DL   |
| <b>Telephone Number:</b>                                       | 028 30 26 20 86  |
| <b>Registered Organisation/Provider:</b>                       | Mercy Care Ltd<br>(Mrs. Peggy O'Neill, Managing Director)  |
| <b>Registered Manager:</b>                                     | Mrs. Elizabeth Doran   |
| <b>Person in Charge of the Home at the time of Inspection:</b> | Mrs. Elizabeth Doran, Registered Manager   |
| <b>Other Person(s) Present During the Inspection:</b>          | <ul style="list-style-type: none"> <li>• Mrs. Peggy O'Neill, Managing Director, Mercy Care Ltd, Registered Responsible Individual</li> <li>• Mr. Frances. O'Hare who is responsible for ongoing maintenance works in the home</li> <li>• Mr. Seamus Gallogly, MGM Mechanical Services Ltd.</li> <li>• Mr. Ronan Magee, Health and Safety Executive Northern Ireland</li> </ul> |
| <b>Categories of Care:</b>                                     | NH-I, NH-PH, NH-PH(E), RC-I, RC-MP, RC-MP(E), NH-LD, NH-LD(E)  |
| <b>Number of Registered Places:</b>                            | 48   |
| <b>Date of previous Estates inspection:</b>                    | 02 December 2014   |
| <b>Date and time of inspection:</b>                            | 29 January 2015 (2:00pm. – 3:25pm.)  |
| <b>Name of Inspector:</b>                                      | 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, Mrs. P. O'Neill, Mr. F. O'Hare and Mr. S. Gallogly.
2. Examination of the most recent risk assessment for the prevention or control of legionella bacteria in the water systems.
3. 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, Mrs. P. O'Neill, Mr. F. O'Hare and Mr. S. Gallogly.

#### **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 29 January 2015, improvements are required to comply with the Nursing Homes Regulations (Northern Ireland) 2005 and the criteria outlined in the following standard:

- Standard 35 - Safe and healthy working practices

This resulted in three 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, Mrs. P. O'Neill, Mr. F. O'Hare and Mr. S. Gallogly throughout the inspection process. The Estates Inspector would also like to acknowledge the advice and guidance provided by Mr. Ronan Magee from the Health and Safety Executive Northern Ireland during this Estates Inspection.

## 9.0 INSPECTION FINDINGS

### 9.1 Recommendations and requirements from the previous Estates inspection on 02 December 2014:

The following issues should be noted with regard to the issues identified for attention during the previous Estates inspection to this home on 02 December 2014:

| <b>Standard 35 - Safe and healthy working practices</b> |  |   |  |   |
|---|--|---|--|---|
| <b>No</b>   | <b>Regulation</b>  | <b>Requirements</b>   | <b>Action taken - As confirmed during this inspection</b>  | <b>Inspector's Comments</b>   |
| 9.1.1   | Regulations<br>13(7)<br>14(2)(a)<br>14(2)(c)<br>27(2)(q) | <b>Previous QIP Item 1</b><br>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. | A full legionella risk assessment was completed by a specialist company on 11 December 2014. The report for this risk assessment included a schematic drawing for the water systems. The results for the further water sampling identified the presence of legionella bacteria in some of the samples. | The report for this risk assessment identified a number of issues for attention. An action plan was being implemented to address these issues. On completion of this action plan further water samples will be taken. Refer also to sections 9.2.2 – 9.2.8 in this report for further details regarding these issues. |

## 9.0 INSPECTION FINDINGS

### 9.1 Recommendations and requirements from the previous Estates inspection on 02 December 2014:

| Standard 35 - Safe and healthy working practices |  |   |  |  |
|--|--|---|--|--|
| No   | Regulation   | Requirements  | Action taken - As confirmed during this inspection   | Inspector's Comments   |
| 9.1.2  | Regulations<br>13(7)<br>14(2)(a)<br>14(2)(c)<br>27(2)(q) | <b>Previous QIP Item 2</b><br>In addition to the immersion 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. | A surface type thermometer had been obtained to facilitate checking the unblended hot water temperatures where blending devices and/or thermostatic mixers have been installed. The Registered Persons had also confirmed to RQIA that the checks at the sentinel outlets for the unblended hot water and the cold water outlets had been increased to weekly. | Refer to sections 9.2.2 – 9.2.8 in this report for further details regarding the current action plan in relation to enhancing the existing legionella bacteria controls. |

## 9.0 INSPECTION FINDINGS CONTINUED

### 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 Since the previous Estates inspection to the home on 02 December 2015 a number of improvements had been carried out to the water systems in the premises. The cold water tanks had been separated, a non-return valve had been fitted to the supply pipework to the feed and expansion tank for the heating installation and new more powerful pumps had been installed on the secondary return pipework. In addition two new vents had been fitted to the cold water tanks.
- 9.2.3 The wash basins and pipework in toilet 15, toilet 16 and in bedroom 46 were to be replaced by 30 January 2015. Subsequent to this Estates inspection confirmation in relation to the completion of these works was received by RQIA from the home.
- 9.2.4 Some improvement works had been carried out to the secondary return pipework to increase the water flows in the system. Further works were ongoing with completion anticipated by 06 February 2015. Following the completion of these improvement works, the water systems will be flushed, disinfected and reflushed. This was scheduled for 11 February 2015. Subsequent to this Estates inspection, RQIA received confirmation from Mrs. Doran that the further improvement works to the secondary return pipework had been completed. Mrs. Doran also confirmed to RQIA that the flushing, disinfection and re-flushing of the water systems were completed as scheduled on 11 February 2015.
- 9.2.5 Temperature gauges should be fitted at the hot water cylinders to assist with monitoring the temperature of the unblended hot water in the secondary return pipework. Reference should be made to item 1 in the attached Quality Improvement Plan.



## 9.0 INSPECTION FINDINGS CONTINUED

### 9.2 Standard 35 - Safe and healthy working practices continued

- 9.2.6 After the disinfection of the water systems on 11 February 2015, a period of ten days will be allowed for the systems to settle down. Further water samples will then be taken by 21 February 2015. These samples should include pre and post flush samples. Any outlets where previous samples indicated the presence of legionella bacteria should be resampled along with a representative number of other outlets throughout the premises. The results for these samples should be closely monitored. Five day indicative results should be confirmed to RQIA for these samples by 26 February 2015. Any further action that may be required will be determined on the basis of these results. Advice should be sought from the legionella risk assessor in relation to the procedure, number and location for these samples. Reference should be made to item 2 in the attached Quality Improvement Plan.
- 9.2.7 In addition to the remedial measures that are to be completed as part of the current action plan, arrangements should be made for Mr. O'Hare to attend awareness training in relation to legionella bacteria in water systems. Mrs. O' Neill undertook to follow up this issue. Subsequent to this Estates inspection, RQIA received confirmation from Mrs. Doran that arrangements had been made for Mr. O'Hare to attend an awareness training course in relation to legionella bacteria in water systems on 21<sup>st</sup> February 2015.

## 9.0 INSPECTION FINDINGS CONTINUED

### 9.2 Standard 35 - Safe and healthy working practices continued

9.2.8 Following the completion of the remedial works to the water systems, the schematic drawing should be updated to ensure that it fully reflects the system as installed including the most recent alterations. In addition, the overall arrangements in place for the ongoing management of the water systems should be reviewed and revised as required to ensure that the following are in place and up to date:

1. A policy in relation to how the water systems in the home are managed. This should demonstrate intent, define responsibilities, allocate resources and set out the operational details for managing the water systems
2. An up to date schematic drawing for all water systems within the premises
3. An up to date scheme of control in relation to legionella bacteria
4. An up to date legionella risk assessment confirming that all of the issues that have been identified for attention have been addressed and signed off by the Registered Manager
5. Comprehensive records for the ongoing inspections, checks, servicing etc...in relation to the water system components
6. An appropriate training programme for the staff involved with the management and maintenance of the water systems
7. Appropriate review and audit procedures in relation to policy, procedures and practice.

Reference should be made to item 3 in the attached Quality Improvement Plan.

9.2.9 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, Mrs. P. O'Neill, Mr. F. O'Hare and Mr. S. Gallogly, 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@rqia.org.uk](mailto:estates@rqia.org.uk).



The Regulation and  
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## QUALITY IMPROVEMENT PLAN

### ANNOUNCED ESTATES INSPECTION IN021182

**OUR MOTHER OF MERCY NURSING HOME, NEWRY RQIA ID 1493**

**29 JANUARY 2015**

| QIP Position Based on Comments from Registered Persons |  |   | 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.   | √ | –          | √  | K. Monaghan     | 30 March 2015 |

**NOTES:**

The details of the quality improvement plan were discussed with Mrs. Elizabeth Doran, Registered Manager, Mrs. Peggy O'Neill, Managing Director, Mercy Care Ltd, Registered Responsible Individual, Mr. Frances. O'Hare who is responsible for ongoing maintenance works in the home and Mr. Seamus Gallogly, MGM Mechanical Services Ltd., 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:**

|   |                 |
|---|-----------------|
| <b>NAME OF REGISTERED MANAGER COMPLETING QIP</b>                                | ELIZABETH DORAN |
| <b>NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP</b> | PEGGY O NEILL   |

Announced Estates Inspection IN021182 – 29 January 2015 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:

| Item | Regulation Reference                                     | Requirements   | Timescale | Details Of Action Taken By Registered Person (S) |
|------|--|--|-----------|--|
| 1.   | Regulations<br>13(7)<br>14(2)(a)<br>14(2)(c)<br>27(2)(q) | Temperature gauges should be fitted at the hot water cylinders to assist with monitoring the temperature of the unblended hot water in the secondary return pipework. Reference should be made to section 9.2.5 in the report. | One month | Temperature gauge has now been fitted.           |

**Safe and healthy working practices continued**

**The following requirements 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)   |
|------|--|--|---|--|
| 2.   | Regulations<br>13(7)<br>14(2)(a)<br>14(2)(c)<br>27(2)(q) | Further water samples should be taken by 21 February 2015. These samples should include pre and post flush samples. Any outlets where previous samples indicated the presence of legionella bacteria should be resampled along with a representative number of other outlets throughout the premises. The results for these samples should be closely monitored. Five day indicative results should be confirmed to RQIA for these samples by 26 February 2015. Any further action that may be required will be determined on the basis of these results. Advice should be sought from the legionella risk assessor in relation to the procedure, number and location for these samples. Reference should be made to section 9.2.6 in the report | 21 February 2015<br>and<br>26 February 2015 | Sample results were emailed Tuesday 3 <sup>rd</sup> March 2015 to the RQIA. Three clear and Room 46 was 50. Samples taken on 8 <sup>th</sup> December 2014 were used as pre flushed samples. See Robbie Watters comments and recommendations attached.<br><br>Advice sought : Room 46 to be flushed daily. Re Check samples mid- April as evidence of good practice. |

**Safe and healthy working practices continued**

**The following requirements 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<br>13(7)<br>14(2)(a)<br>14(2)(c)<br>27(2)(q) | <p>Following the completion of the remedial works to the water systems, the schematic drawing should be updated to ensure that it fully reflects the system as installed, including all recent alterations. In addition, the overall arrangements in place for the ongoing management of the water systems should be reviewed and revised as required to ensure that the following are in place and up to date:</p> <ol style="list-style-type: none"> <li>1. Policy</li> <li>2. Schematic drawing</li> <li>3. Scheme of control</li> <li>4. Legionella risk assessment (signed off)</li> <li>5. Comprehensive records</li> <li>6. Training programme</li> <li>7. Review and audit procedures</li> </ol> <p>Reference should be made to section 9.2.8 in the report.</p> | Two months | <p>The following are up to date and in place:</p> <ul style="list-style-type: none"> <li>- Policy</li> <li>- Scheme of Control</li> <li>- Legionella Risk Assessment signed off</li> <li>- Comprehensive records</li> <li>- All Maintenance men have received training (21/02/2015).</li> <li>- Review and audit procedures</li> <li>- Schematic drawing being updated at present.</li> </ul> |