

# Announced Variation to Registration Premises Inspection Report 27 June 2017











### **Rockfield Care Centre**

Type of Service: Nursing Home

Address: Windmill Road, Newry, BT34 2QW

Tel No: 028 3026 9546 Inspector: Raymond Sayers

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

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 service provider from their responsibility for maintaining compliance with legislation, standards and best practice.

#### 1.0 What we look for



#### 2.0 Profile of service

This is a single storey detached nursing home providing nursing care over a range of categories.

#### 3.0 Service details

Registered Provider / Responsible Individual: Burnview Healthcare Ltd / Mrs. Briege Agnes Kelly	Registered manager: Ms. Ciara Power
Person in charge of the home at the time of inspection:  Ms. Ciara Power	Date manager registered: 31 March 2014
Categories of care: NH-I, RC-I, NH-MP, NH-PH	Number of registered places: 34

### 4.0 Inspection summary

An announced inspection took place on 26 June 2017 from 08.40 to 10:20.

This inspection was underpinned by The Nursing Homes Regulations (Northern Ireland) 2005 and the care Standards for Nursing Homes April 2015.

The variation to registration to Rockfield Care Centre was granted from a premises perspective following this inspection.

### 4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	1	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Mr Gavin Kelly, Environment/Facilities Manager, as part of the inspection process and can be found in the main body of the report.

### 5.0 How we inspect

Prior to the inspection a range of details relevant to the variation to registration was reviewed. This included the following records: premises inspector variation evaluation report, proposed & existing floor plan details, & relevant e-mail communications.

During the inspection the inspector met with Mr Gavin Kelly, a visual inspection of the completed conversion works was completed. The fire risk assessment document and associated fire safety maintenance certificates were reviewed.

The findings of the inspection were provided to the person in charge at the conclusion of the inspection.

### 6.0 The inspection

### 6.1 Review of areas for improvement from the most recent inspection dated 23 June 2017

The most recent inspection of the home was an unannounced care inspection, IN027837 dated 23 June 2017.

This QIP will be validated by the care inspector at the next care inspection.

This inspection focused solely on the variation to registration application made by the registered provider to RQIA.

## 6.2 Review of areas for improvement from the last premises inspection dated 05 January 2017

Areas for improvement from the last premises inspection		
Area for improvement 1 Ref: Standard 48 Stated: First time To be completed by: 24 February 2017	The smoke sealing along the hinge side of the right hand leaf (as viewed from the dining room side) of the double doors to the kitchen should be improved to provide an effective seal to these doors. The issue in relation to the re-zoning of the fire detection and alarm system in the roof space should be reviewed with the fire risk assessor and the fire alarm engineers to agree the best way to address this issue. The plans to address this issue should be confirmed to RQIA.  Action taken as confirmed during the inspection:  All actions implemented	Met
Area for improvement 2 Ref: Standard 47 Stated: First time To be completed by: 24 February 2017	A review in relation to the need to retain two washer/disinfectors should be carried out. The infection control advisor and the RQIA nursing inspector for the home should be consulted as part of this review. The outcome of this review should be confirmed to RQIA. In addition the next annual service of the washer/disinfector that is still being used in the home should be carried out.	Met

	Action taken as confirmed during the inspection: Two washer disinfectors currently waiting for repairs to be completed. Equipment will be subjected to the manufacturer's recommended maintenance regime upon repair works completion.	
Area for improvement 3  Ref: Standard 47  Stated: First time  To be completed by: Ongoing	The water outlets in the store above the boiler room should be flushed daily, the return temperatures for the unblended hot water should be increased to 55° C, the short 'dead legs' in the new store room opposite bedroom 5 (Opal Suite) should be removed and the action that should be taken at this stage in relation to the 'dead leg' pipework in the kitchen should be agreed with the legionella risk assessor.	Partially Met
	Action taken as confirmed during the inspection: Dead leg pipework in kitchen has not yet been removed, it will be completed during proposed kitchen refurbishment works.	

### 6.3 Inspection findings

### 1. Legionella prevention control works.

### Areas of good practice

Legionella prevention controls are implemented.

### **Areas for improvement**

Kitchen "dead- leg" water services pipework dead-leg pipe work has not yet been removed, but is scheduled to be completed during proposed kitchen refurbishment works.

	Regulations	Standards
Total number of areas for improvement	1	0

### 7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the quality improvement plan (QIP). Details of the QIP were discussed with Gavin Kelly, Environment/Facilities Manager as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that if the action outlined in the QIP is not taken to comply with regulations and standards this may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all areas for improvement identified 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.

### 7.1 Areas for improvement

Areas for improvement have been identified where action is required to ensure compliance with The Nursing Homes Regulations (Northern Ireland) 2005.

### 7.2 Actions to be taken by the service

The QIP should be completed and detail the actions taken to address the areas for improvement identified. The registered provider should confirm that these actions have been completed and return the completed QIP via Web Portal for assessment by the inspector.

RQIA will phase out the issue of draft reports via paperlite in the near future. Registered providers should ensure that their services are opted in for the receipt of reports via Web Portal. If you require further information, please visit <a href="www.rqia.org.uk/webportal">www.rqia.org.uk/webportal</a> or contact the web portal team in RQIA on 028 9051 7500.

### **Quality Improvement Plan**

### Action required to ensure compliance with The Nursing Homes Regulations (Northern Ireland)2005

**Area for improvement 1** 

**Ref**: Regulations 14.(2), (a) & (c)

Ref: 6.3.1

works.

Stated: Second time

**To be completed by:** 02 October 2017

Response by registered person detailing the actions taken: Work is scheduled to be completed on or before 2/10/17. As

requested by Mr Sayers we will advise the states department prior to

The registered person shall complete the legionella prevention kitchen "dead-leg" removal works during the proposed kitchen refurbishment

work commencing.

<sup>\*</sup>Please ensure this document is completed in full and returned via Web Portal \*





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