



Unannounced Estates Follow Up Inspection Report 13 June 2018



Valley Nursing Home ID:1502

Type of service: Nursing Home
Address: 8 Tullybroom Rd, Clogher, BT76 0UW
Tel No: 028 8554 8048
Inspector: Raymond Sayers

www.rqia.org.uk

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 Nursing Home providing residential care for 96 service users/patients.

3.0 Service details

Organisation/Registered Provider: Valley Nursing Home (MPS) Ltd Responsible Individual(s): Paul Warren-Gray	Registered Manager: Lorraine Margaret Cozma
Person in charge at the time of inspection: Lorraine Margaret Cozma	Date manager registered: 05/01/2015
Categories of care: NH-DE, NH-I, NH-PH, NH-PH(E), NH-TI, NH-MP, NH-MP(E)	Number of registered places: 96

4.0 Inspection summary

An unannounced inspection took place on 13 June 2018 from 14.00 to 15.25.

This inspection was underpinned by

- The Nursing Homes Regulations (Northern Ireland) 2005
- Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes, April 2015

The inspection sought to assess progress with issues raised during the previous estate inspection on 3 May 2018 & the subsequent meeting regarding an intention to issue a Failure to Comply (FTC) Notice meeting dated 10 May 2018.

A FTC was not issued and a refurbishment works action plan was submitted by the registered Responsible Person on 11 May 2018.

The following areas were examined during the inspection:

- Fire safety
- Environment/ condition of interior building fabric with specific reference to the refurbishment works action plan.

The findings of this report will provide the registered responsible person with the necessary information to assist them to fulfil their responsibilities, enhance practice and patients experience.

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	1	0

Areas for improvement and details of the Quality Improvement Plan (QIP) were discussed with Lorraine Cozma, Registered Manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

1. The interior building fabric surface finishes were in a poor physical condition, however works were currently in progress to implement repairs in accordance with the refurbishment works action plan submitted on 11 May 2018.
2. Fire safety issues related to a patient smoking tobacco products in a bedroom, plus the fire detection & alarm system maintenance inspection regime were reviewed, and noted as satisfactory.

4.2 Action/enforcement taken following the most recent premises inspection

Other than those items detailed in the QIP no further actions required to be taken following the most recent inspection on 13 June 2018.

5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records:

- the refurbishment works action plan submitted to RQIA on 11 May 2018
- recent inspection reports and returned QIPs
- recent correspondence with the provider
- the premises related incidents reported to RQIA since the last premises inspection.

Prior to the inspection, it was ascertained that no premises related incidents had been reported to RQIA since the last premises inspection.

During the inspection we met with Lorraine Cozma, Registered Manager, and Francis Mallon, Maintenance Supervisor.

The following records were examined during the inspection:

- the refurbishment works action plan submitted to RQIA on 11 May 2018
- patient smoking activity policy
- staff control/monitoring record of patient smoking activity
- fire detection & alarm maintenance inspection certificate

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 03 May 2018

The most recent inspection of the Nursing Home was an unannounced premises inspection. The completed QIP was returned, and approved by the estates inspector on 21 June 2018.

6.2 Review of areas for improvement from the last premises inspection dated 03 May 2018

Areas for improvement from the last premises inspection		
Action required to ensure compliance with The Nursing Homes Regulations (Northern Ireland) 2005		Validation of compliance
Area for improvement 1 Ref: Regulations 27.(2)(b) & (d) Stated: Second time To be completed by as per refurbishment schedule	<p>The registered person shall implement the refurbishment works programme in accordance with the schedule submitted by e-mail on 11 May 2018.</p> <p>Ref: 4.3</p>	Partially met & carried forward to the next premises inspection See 6.3 below and QIP item 1.
	<p>Action taken as confirmed during the inspection: Inspector confirmed that refurbishment works are progressing as per works action plan. As works are ongoing compliance verification will be carried forward to the next premises inspection.</p>	
Area for improvement 2 Ref: Regulation 27.(4)(a) Stated: First time To be completed by immediate & continuing	<p>The registered person must maintain a currently valid fire risk assessment, detailing the specific risk and precautions applicable for each tobacco smoker patient registered on the premises. The safety precautions must be appropriate and validated by the registered manager/fire risk assessor.</p> <p>Ref.4.3</p>	Met
	<p>Action taken as confirmed during the inspection: Fire safety controls record reviewed and assessments found to be in place and updated. See 6.3 below.</p>	

Action required to ensure compliance with the Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes, April 2015		Validation of compliance
Area for improvement 1 Ref: Standard 48.3 Stated: First time To be completed by: 28 June 2018	The registered person shall verify that the fire detection and alarm system is maintained by a competent person at intervals compliant with BS5839 recommendations. (Six monthly maximum interval). Ref 4.2 Action taken as confirmed during the inspection: Records indicate BS5839 maintenance inspection completed and registered manager to verify completion of six monthly maintenance regime with maintenance engineering company.	Met

6.3 Inspection findings

Fire Safety

A patient smokes cigarettes in his bedroom; patient cigarette smoking activity is risk assessed on an individual patient specific basis, and precautions implemented in compliance with the patient cigarette/tobacco smoking policy.

Areas of good practice relating to fire safety.

Smoking activity in bedroom is monitored & controlled in accordance with the patient specific cigarette/tobacco smoking risk assessment & policy.

There were no additional areas for improvement identified during the inspection relating to fire safety.

Interior environment/building fabric

Some building interior finishes are damaged/deteriorated & in a poor physical condition

Areas of good practice relating to Interior environment/building fabric

A refurbishment works programme is ongoing in accordance with the refurbishment works action plan submitted to RQIA on 11 May 2018

Areas for improvement relating to Interior environment/building fabric

Implement works action plan in accordance with planned schedule.

	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 Lorraine Cozma, Registered 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
- Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes, April 2015

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.

Quality Improvement Plan

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

<p>Area for improvement 1</p> <p>Ref: Regulations : 27.(2)(b) & (d)</p> <p>Stated: Second time</p> <p>To be completed by: as per refurbishment works programme schedule</p>	<p>The registered person shall continue to implement the refurbishment works programme in accordance with the schedule submitted by e-mail on 11 May 2018.</p> <p>Action required to ensure compliance with this regulation was reviewed as part of this inspection, and will be carried forward to the next premises inspection.</p> <p>Ref: 6.2.1</p>
	<p>Response by registered person detailing the actions taken:</p> <p>All works progressing to the works plan. Decoration programme is ongoing on a daily basis, flooring for Tullybroom is scheduled for end of august , flooring complete in main building</p>

Please ensure this document is completed in full and returned via Web Portal



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