

Report for RQIA Inspection IN021604 - Lawnfield House Residential Care Home, Newcastle RQIA ID1597 on 12 March 2015

- **The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003**
- **The Residential Care Homes Regulations (Northern Ireland) 2005**
- **The Residential Care Homes Minimum Standards 27, 28 and 29 (DHSSPS, August 2011)**

I would confirm the following matters with regard to above:

An inspection of Lawnfield House Residential Care Home in Newcastle was carried out by RQIA on 12 March 2015. Ms. Isobel Leslie, Registered Manager and Mr. Thomas Killen, who deals with the maintenance issues in the home, were present during this inspection.

It is good to report that the premises being used for the purposes of this residential care home were very clean, odour free and in good decorative order. This is to be commended.

This Estates inspection focused specifically on bedroom 19 and the installation of the new ensuite shower, wash basin and toilet. These changes relate to an application by the registered persons for a variation to the conditions of registration, RQIA Reference VA010134. A brief review of the other internal parts of the premises was also carried out during this Estates inspection.

The issues included in the Quality Improvement Plan for the previous Estates inspection to this home on 22 November 2012 were not reviewed during this Estates inspection. These issues will be reviewed as part of the next routine Estates inspection to this establishment.

It is good to report that the new ensuite facilities for bedroom 19 had been finished to a high standard. This is to be commended.

RQIA considers that action is required by the registered persons in relation to the items 1, 2, 3, 4, 5, 6 and 7 noted below in order to ensure compliance with the above legislation and standards:

Standard 27 – Premises and grounds

It is good to report that no issues were identified for attention in relation to this standard during this Estates inspection. This is to be commended.

Standard 28 - Safe and healthy working practices

1. Confirmation in relation to compliance with the current standards for legionella bacteria control should be provided for the alterations and extensions to the plumbing system. Confirmation that the new wash basin, hairdressing basin and

shower are fitted with DO8 Type 3 fail-safe thermostatic mixing valves should also be provided.

Regulations 13(7), 14(2)(a), 14(2)(c) and 27(2)(q)
Residential Care Homes Minimum Standard 28.1

2. A check should be carried out to ensure that any flexible plumbing connections are WRAS approved

Regulations 13(7), 14(2)(a), 14(2)(c) and 27(2)(q)
Residential Care Homes Minimum Standard 28.1

3. The position in relation to Building Control approval for the works to the new ensuite for bedroom 19 should be clarified. A certificate for the alterations and extensions to the fixed wiring installation in connection with the new ensuite facilities for bedroom 19 should also be obtained.

Regulations 14(2)(a), 14(2)(c) and 27(2)(q)
Residential Care Homes Minimum Standard 28.1

4. The doors to all stores and the laundry should be kept locked. A new lock and self-closing device should also be fitted to the door of the maintenance store on the first floor.

Regulation 14(2)(a), 14(2)(c)
Residential Care Homes Minimum Standard 28.1

5. The residents' call system in the new ensuite facility for bedroom 19 should be extended so that a call point is available at the shower.

Regulations 27(2)(n)
Residential Care Homes Minimum Standard 28.1

6. The new shower has a small step in. This issue should be considered when assessing the suitability of the residents to be accommodated in this room.

Regulations 14(2)(a), 14(2)(c) and 27(2)(a)
Residential Care Homes Minimum Standard 28.1

Standard 29 – Fire Safety

7. The fire risk assessment for the home should be reviewed, updated and actioned as required. The following issues should be considered during this review:

- a. The fire protection measures for the new hairdressing facility on the ground floor
- b. The compartmentation in the roof spaces
- c. The drawing for the fire detection and alarm system. Each zone should be marked with a different colour and the detail in relation to the fire detection in the roof void should also be included

Regulations 27(4)(b) and 27(4)(d)(i)
Nursing Homes Minimum Standard 29.2

Action Required by Registered Persons

Items 1, 2, 3, 4, 5, 6 and 7 above identified for action in this report should be addressed in a prioritised and timely manner. These issues will be followed up by RQIA. This may include a further inspection on or before **11 June 2015**.

A detailed response to this inspection report should be returned to this office via email to estates@rqia.org.uk by **28 April 2015**. If you disagree with the factual accuracy of the report you should make a separate response to the above email address in order that amendments can be considered and made or your comments appended.

On **29 April 2015** this inspection report will be made open to the public (bar any communication regarding factual accuracy). If you have not provided a detailed response by this date, this report will still be made open without your comments.

You will be aware that this report and any response you submit will constitute an open report on this establishment and will be made available to interested parties on request. If a detailed response is not received in writing by the required date given above, I would ask you to regard this copy of the report as final and an open document effective from **29 April 2015**.

Thank you for your co-operation.

I look forward to hearing from you.

Regards

A handwritten signature in black ink, appearing to read 'K Monaghan', written in a cursive style.

Kieran Monaghan
Estates Officer

Quality Improvement Plan

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Response for Item 1	Following consultation with the Plumbing and Heating contractors the registered manager can confirm that the new wash basin, hairdressing basin and shower are fitted with Fail-Safe thermostatic mixing valves. The manager will ensure documentation is in place to reflect this and will be made available to the inspector during his next home inspection.
Response for Item 2	The Manager can confirm all flexible plumbing connections undertaken in Lawnfield in the past six years are WRAS approved; however, the Manager has requested the service contractors check all areas to ensure compliance and documentation is in place to match requirements.
Response for Item 3	The manager has received clarification in relation to building control approval for the works to the new ensuite. The Manager can confirm that a certificate for the alterations and extensions to the fixed wiring installation will be made available for the inspector during his next inspection.
Response for Item 4	All Care staff and service maintenance have been reminded to ensure all doors to stores and the laundry room are kept locked; this will be monitored and added to the quarterly in-house Health & Safety inspection checks. In-house maintenance will fit a new lock and self-closing device to the maintenance store on the first floor.
Response for Item 5	The manager has instructed service maintenance contractors to extend the call system to the ensuite facility in bedroom 19.
Response for Item 6	Staff will undertake an assessment before any service user would be allocated bedroom 19 and where required, a risk assessment would be completed to ensure the appropriate level of support is provided for the service user.
Response for Item 7	An annual fire risk assessment was complete in Lawnfield on 24/3/15. The assessor reviewed the fire protection measures for the hairdressing facility and has considered this to be part of the lounge and therefore has made no recommendations at this time. During the same assessment, the compartmentation in the roof space was inspected and the assessor has made no recommendations at this time. The assessor

	reviewed the drawing for the fire detection and alarm system and has recommended a review of the fire alarm drawings to reflect each zone using coloured codes and each compartmentation drawings will then be displayed at each fire point
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Please complete the following table to demonstrate that this Quality Improvement Plan has been completed by the Registered Manager and approved by the Registered Responsible Person /Responsible Individual:

NAME OF REGISTERED MANAGER COMPLETING QIP	Isobel Leslie Lawnfield House
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	<i>Linda Wray</i>

QIP Position Based on Comments from Registered Persons (for RQIA use only)	QIP Closed		Estates Officer	Date
	Yes	No		

QIP Position Based on Comments from Registered Persons (for RQIA use only)			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.	x	-	x	K Monaghan	22 April 2015