



The Regulation and  
Quality Improvement  
Authority

**THE REGULATION AND QUALITY IMPROVEMENT  
AUTHORITY**

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**ANNOUNCED ESTATES INSPECTION**

**Inspection No:** IN021087  
**Establishment ID No:** 1638  
**Name of Establishment:** Nazareth House Care Village  
**Date of Inspection:** 29 January 2015  
**Inspector's Name:** Colin Muldoon

## 1.0 GENERAL INFORMATION

<b>Name of Home:</b>	Nazareth House Care Village
<b>Address:</b>	516 Ravenhill Road, Belfast, BT6 0BW
<b>Telephone Number:</b>	028 9069 0600
<b>Registered Organisation/Provider:</b>	Poor Sisters of Nazareth Ms Jenny Hall (Responsible Person)
<b>Registered Manager:</b>	Mrs Patricia McMullan
<b>Person in Charge of the Home at the time of Inspection:</b>	Ms Jenny Hall
<b>Other person(s) consulted during inspection:</b>	Mr Michael McPhillips (Maintenance Officer)
<b>Type of establishment:</b>	Nursing Home
<b>Number of Registered Places:</b>	48
<b>Category of Care</b>	NH-I, NH-PH, NH-PH(E), NH-TI
<b>Date and time of inspection:</b>	29 January 2015 10.00am – 3.00pm
<b>Date of previous Estates inspection:</b>	28 January 2013
<b>Name of Inspector:</b>	Colin Muldoon

## **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
- 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:

- Discussion with Ms Jenny Hall and Mr Michael McPhillips
- Examination of records
- Inspection of the home internally and externally. Resident's private bedrooms were only inspected when unoccupied and permission was granted
- Evaluation and feedback.

Any other information received by RQIA about this Registered Provider 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 Ms Jenny Hall and Mr Michael McPhillips.

## **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 32 - Premises and grounds
- Standard 35 - Safe and healthy working practices
- Standard 36 - Fire Safety.

## **7.0 PROFILE OF SERVICE**

Nazareth House Care Village is set on an extensive site off the Ravenhill Road in south Belfast. Despite the urban setting the site is quiet and relatively private.

The home was designed and built to a high standard. All resident areas are at ground floor level. All the bedrooms are single occupancy and have ensuite toilet and shower. The spacious accommodation includes living rooms, dining rooms, sunrooms, a library, shop and coffee shop. There is also a hairdressing salon, hall/cinema, and a chapel.

## **8.0 SUMMARY**

There was good evidence of maintenance activities and the home was very well presented. In general the building appeared to be in good condition although some matters relating to the environment were identified. Therefore, following the Estates Inspection of Nazareth House Care Village on 29 January 2015 improvements are required to comply with the Nursing Homes Regulations (Northern Ireland) 2005 and the criteria outlined in the following standards:

- Standard 32 - Premises and grounds
- Standard 36 - Fire Safety.

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 Ms Jenny Hall and Mr Michael McPhillips during the inspection process.

## 9.0 INSPECTOR'S FINDINGS

### 9.1 Recommendations and requirements from previous Estates inspection on 28 January 2013.

No	Regulation Ref.	Requirements	Action taken - as confirmed during this inspection	Inspector's Comments
9.1.1	Regulation 27.-(2)(q)	The reason for the non-completion of the installation pipework section of the Gas Safe certificate relating to the kitchen must be clarified and followed up. (Item 1 in previous QIP)	Addressed	N/A
9.1.2	Regulation 14.-(2)(c)	The risk assessment and measures being used for the control of legionella should be reviewed and amended as necessary so that they are in line with the HSC approved code of practice L8 <i>The control of legionella bacteria in water systems</i> and Health Technical Memorandum 04-01: <i>The control of legionella, hygiene, "safe" hot water, cold water and drinking water systems</i> (Item 2 in previous QIP)	<p>A legionella risk assessment was carried out in May 2014 and there is a scheme in place towards the control of legionella.</p> <p>In January 2015 a contractor carried out an audit of the arrangements for controlling legionella in the premises. The audit tool used was obtained from the Health and Safety Executive.</p> <p>Following the issue of Safety Alert EFA/2013/004 remedial works were carried out to the water system in 2014.</p>	N/A

9.1.3	Regulation 27.-(4)(a)	<p>The review of the fire risk assessment which is due in March must be carried out using the guidance and criteria in the latest version of Firecode document NIHTM84. The assessment should conclude with a summary which confirms whether each aspect of NIHTM84 is acceptable. (refer to the sample Summary sheet at back of NIHTM84) (Item 3 in previous QIP)</p>	<p>The fire risk assessment was reviewed in April 2013 and again in April 2014 by a specialist contractor with MIFPO accreditation. The assessor confirmed that NIHTM84 was used for the assessments.</p> <p>The last assessment confirmed that no actions were required.</p> <p>Since the last Estates inspection significant work has been carried out to enhance fire safety in the home by fitting additional detectors in cupboards and the fitting of swing free type automatic closers to bedroom doors.</p>	N/A
9.1.4	Regulation 27.-(4)(e) 27.-(4)(f)	<p>Arrangements must be made which will ensure that all staff participate in fire safety training and practice drills in accordance with Firecode document NIHTM84. (Item 4 previous QIP)</p>	<p>Fire safety training was carried out in October and December 2014 and several practice drills have been carried out over the last year. All the drills were carried out during the day shift.</p>	<p>The drills were discussed and it was agreed that they would also be carried out at other times to ensure that all staff participate and that an effective evacuation could be carried out when the minimum number of staff are on duty. (Item 2 in Quality Improvement Plan)</p>

9.1.5	Regulation 27.-(4)(d)(i)	The main corridor doors nearest the entrance to the staff area require to be adjusted so that they close to provide an effective fire seal. (Item 5 in previous QIP)	Addressed	N/A
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**9.2 Standard 32 - Premises and grounds** - *The premises and grounds are safe, well maintained and remain suitable for their stated purpose*

9.2.1 Although there were no records available Mrs Hall and Mr McPhillips confirmed that arrangements are in place for the thermostatic mixing valves to be serviced annually.

9.2.2 The home has a number of washer disinfectors. It should be confirmed that there are arrangements for these to be serviced and their satisfactory performance validated in line with the provisions of HTM 2030.  
(Item 1 in Quality Improvement Plan)

These matters are detailed in the section of the attached Quality Improvement Plan titled '**Standard 32 - Premises and grounds**'.

**9.3 Standard 35 - Safe and healthy working practices** - *The home is maintained in a safe manner*

9.3.1 No issues were identified during this inspection

**9.4 Standard 36: Fire safety** - *Fire safety precautions are in place that reduce the risk of fire and protect patients, staff and visitors in the event of fire.*

9.4.1 During the inspection a random selection of fire doors were reviewed. A small number were found to require some adjustment.  
(Item 3 in Quality Improvement Plan)

These matters are detailed in the section of the attached Quality Improvement Plan titled '**Standard 36: Fire safety**'



## **10.0 QUALITY IMPROVEMENT PLAN**

The details of the Quality Improvement plan appended to this report were discussed with Ms Jenny Hall and Mr Michael McPhillips 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 home to improve the quality of life experienced by residents.

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:

**Regulation and Quality Improvement Authority  
9th Floor  
Riverside Tower  
5 Lanyon Place  
BELFAST  
BT1 3BT**



## Quality Improvement Plan sign off sheet for estates inspectors

<b>Name of Home</b>	Nazareth House Care Village NH
<b>Date of Inspection</b>	29 January 2015
	C Muldoon

QIP Position Based on Comments from Registered Persons			QIP Closed		Estates Officer	Date
			Yes	No		
A.	All items confirmed as addressed.	√	√		C Muldoon	12/03/2015
B.	All items either confirmed as addressed or arrangements confirmed to address within stated timescales.					
C.	Clarification or follow up required on some items.					

Estates Inspection – QIP sign off sheet

Informing and Improving Health and Social Care

**NOTES:**

The details of the Quality improvement Plan were discussed with Ms Jenny Hall and Mr Michael McPhillips 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 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 completed by the registered provider and registered manager and returned to [estates@rgia.org.uk](mailto:estates@rgia.org.uk).

**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>	
<b>NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP</b>	

Announced Estates Inspection to Nazareth House Care Village 29 January 2015

**Assurance, Challenge and Improvement in Health and Social Care**

### Standard 32 - Premises and grounds

The following requirements and recommendations should be noted for action in relation to Standard 32 - Premises and grounds

Item	Regulation Reference	Requirement	Timescale	Details Of Action Taken By Registered Person (S)
1	Regulation 13.-(7)	It should be confirmed that there are arrangements for the washer disinfectors to be serviced and their satisfactory performance validated in line with the provisions of HTM 2030. (Item 9.2.2 in report)	One Month	RECORDS WERE REVIEWED AND THESE ITEMS HAVE BEEN SERVICED AND THEIR SATISFACTORY PERFORMANCE VALIDATED IN LINE WITH HTM 2030

- THIS IS DONE IN MARCH EACH YEAR.

### Standard 36 - Fire Safety

The following requirements and recommendations should be noted for action in relation to Standard 36 - Fire Safety

Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
2	Regulation 27.-(4)(f)	The arrangements for carrying out practice fire drills should be reviewed to ensure that all staff participate and that it can be verified that the emergency procedure can be effectively implemented at any time and when the minimum number of staff are on duty. (Item 9.1.4 in report)	Ongoing	ADDITIONAL FIRE DRILLS HAVE TAKEN PLACE WHEN THE MINIMUM NUMBER OF STAFF ARE ON DUTY. THIS WILL BE ONGOING.
3	Regulation 27.-(4)(c) and (d)(i)	A survey should be carried out of all fire doors to ensure that they operate correctly to provide an effective fire seal. (Item 9.4.1 in report)	One Month	THIS HAS BEEN COMPLETED.