



The Regulation and  
Quality Improvement  
Authority

**THE REGULATION AND QUALITY IMPROVEMENT  
AUTHORITY**

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**ANNOUNCED ESTATES INSPECTION**

**Inspection No:** IN017932  
**Establishment ID No:** 1658  
**Name of Establishment:** Sunnyside House  
**Date of Inspection:** 23 September 2014  
**Inspector's Name:** Mr Gavin Doherty

## 1.0 GENERAL INFORMATION

<b>Name of Home:</b>	Sunnyside House
<b>Address:</b>	25 Riverwood Vale High Donaghadee Road Bangor BT20 4QE
<b>Telephone Number:</b>	9127 0615
<b>Registered Organisation/Provider:</b>	Mrs Linda Wray Presbyterian Board of Social Witness
<b>Registered Manager:</b>	Mrs Anna McCaffrey
<b>Person in Charge of the Home at the time of Inspection:</b>	Mrs Anna McCaffrey
<b>Other person(s) consulted during inspection:</b>	Mr Nathan Curry Fold Housing Association
<b>Type of establishment:</b>	Residential Care Home
<b>Number of Registered Places:</b>	45 RC-I, RC-PH, RC-DE A maximum of 12 persons in DE category of care.
<b>Date and time of inspection:</b>	23 September 2014 from 10:00 – 12:30
<b>Date of previous inspection:</b>	6 March 2012
<b>Name of Inspector:</b>	Mr Gavin Doherty

## **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 residential care 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 Residential Care Homes, and to determine the provider's compliance with the following:

- The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003
- The Residential Care Homes Regulations (Northern Ireland) 2005
- Residential Care 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 the registered manager and staff
- Examination of records
- Inspection of the home internally and externally. Patient'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 Mrs Anna McCaffrey, Registered manager and Mr Nathan Curry, Fold Housing Association.

## **6.0 INSPECTION FOCUS**

The inspection sought to establish the level of compliance achieved with respect to the following DHSSPS Residential Care 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**

Sunnyside House is a single storey Residential Care Home located in Riverwood Vale, a residential area of Bangor. The Home is set in its own spacious grounds with private garden areas with raised beds and seating. It is a purpose built home designed to provide accommodation for forty five residents in single en-suite bedrooms. The home consists of five wings known as Castle, Ballyholme, Dufferin, Abbey and Clandeboye and has a wing devoted to the service facilities. The lounges, dining rooms and entrance hallway/reception area are spacious and bright. The Home is tastefully decorated with modern colours and fabrics throughout. There is ample car parking. The home is the initiative of the Presbyterian Board of Social Witness and Fold Housing Association.

## **8.0 SUMMARY**

Following the Estates Inspection of Sunnyside House on 23 September 2014 improvements are required to comply with the Residential Care Homes Regulations (Northern Ireland) 2005 and the criterion outlined in the following standards:

- Standard 35 - Safe and healthy working practices
- Standard 36 - Fire Safety

This resulted in three requirements and no recommendations. These are outlined in the following section and the quality improvement plan appended to this report.

The Estates Inspector would like to acknowledge the assistance and hospitality of Mrs Anna McCaffrey, Mr Nathan Curry and the Home's staff throughout the inspection process.

## 9.0 INSPECTOR'S FINDINGS

### 9.1 Recommendations and requirements from previous inspection of 5 March 2012.

No	Regulation Ref.	Restated Requirements	Action taken - as confirmed during this inspection	Inspector's Comments
1	14(2)(a),(c)	The lighting levels in the home's treatment room were considered to be inadequate in allowing staff to safely attend to the resident's needs. It is essential that the intensity and quality of the lighting in this area is suitable and sufficient to attend to the residents varied medical needs.	The lighting levels were observed during this inspection to be suitable and sufficient.	Requirement Fulfilled.
2	14(2)(a),(c)	Ensure that the bare wood shelving in the linen stores and laundry are suitably sealed or replaced with non-porous materials in line with current infection control best practice.	All shelving throughout the home had been suitably sealed	Requirement Fulfilled.
3	27 (4)(a)	The roof void access hatch in the Electrical Switch Room was damaged, compromising the fire compartmentation of this room. This hatch must be repaired or replaced immediately.	Hatch was noted as being replaced at the time of the inspection	Requirement Fulfilled

**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 There was good evidence of maintenance activities within the home, and the home appeared clean and very well kept. Maintenance procedures for the building and engineering services were in place and appear to comply with this standard. There were therefore no requirements or recommendations made against this standard during this inspection.

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

9.3.1 By in large, safe and healthy working practices appear evident in the home in accordance with this standard. Portable appliance testing was undertaken on 17 September 2014 and no failures were identified. All gas powered appliances were inspected on 17 June 2014 and no remedial works were identified at this time. A risk assessment in relation to the control of legionella bacteria in the premises hot and cold water systems was undertaken on 25 June 2013 and suitable control measures are in place. The top score of '5' was awarded by the local council during their most recent inspection by their Environmental Health department on 19 February 2014. However, two issues have been identified for attention by the registered manager. These are detailed below and in the section of the attached quality improvement plan titled '**Standard 35 - Safe and healthy working practices**'.

9.3.2 Confirmation should be provided by Fold Housing Association that 'Coral' service the thermostatic mixing valves throughout the home in accordance with the manufacturer's recommendations or at least annually.  
(Item 1 in the attached Quality improvement plan)

9.3.3 Ensure that all items of equipment used to lift residents (including manual bath hoists) are subject to regular 6 monthly 'thorough examination' as required by the 'Lifting Operations, Lifting Equipment Regulations'.  
(Item 2 in the attached Quality improvement plan)

**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 Fire Safety procedures in the home are, in the main, generally in line with this standard. A fire risk assessment was undertaken on 18 February 2014. The fire alarm & detection system, emergency lighting installation and portable fire-fighting equipment are subject to suitable inspection and testing. In house user checks are also in place for these systems and records were available for inspection within the home. Fire safety training is undertaken regularly throughout the year and to ensure that all staff receive training twice in any given 12 month period. The most recent fire drill was undertaken on 5 September 2014. However, one issue was identified for attention by the registered manager. This is detailed below and in the section and in the section of the attached quality improvement plan titled '**Standard 36: Fire safety**'.

9.4.2 Ensure that all bedroom doors throughout the home provide 30 minute fire resistance and are fitted with self-closing devices, in accordance with the latest guidance issued by the Northern Ireland Fire and Rescue Service. Full details may be found at:

[http://www.rqia.org.uk/cms\\_resources/door%20closers%20April%202013.pdf](http://www.rqia.org.uk/cms_resources/door%20closers%20April%202013.pdf)

Details of any proposals including the assessment confirming the proposed self-closing device will not impact adversely on the mobility, safety or quality of life of the room occupant should be forwarded to RQIA prior to commencement of the work. (Item 3 in the attached Quality improvement plan)

## **10.0 QUALITY IMPROVEMENT PLAN**

The details of the Quality Improvement plan appended to this report were discussed with Mrs Anna McCaffrey and Mr Nathan Curry 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 Residential Care 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**





The Regulation and  
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## Quality Improvement Plan

### Announced Estates Inspection

Sunnyside House

23 September 2014

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.		✓	<i>E. D. [Signature]</i>	2/12/14

**NOTES:**

The details of the quality improvement plan were discussed with Mrs Anna McCaffrey and Mr Nathan Curry as part of the inspection process.

The timescales commence from the date of inspection.

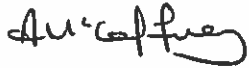

Requirements are based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 and The Residential Care Homes Regulations (Northern Ireland) 2005 and must be met.

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@rqia.org.uk](mailto:estates@rqia.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 Sunnyside House Residential Care Home on 23 September 2014

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**Standard 28 - Safe and healthy working practices**

The following requirements and recommendations should be noted for action in relation to Standard 28 - Safe and healthy working practices

Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
1	Regulation 14 (2)(a),(c) 27 (2)(q)	Confirmation should be provided by Foid Housing Association that 'Coral' service the thermostatic mixing valves throughout the home in accordance with the manufacturer's recommendations or at least annually.  (9.3.2 in the Report)	12 Weeks	<i>Coral environmental service the thermostatic mixing valves throughout the home twice yearly. Last serviced September 2014.</i>
2	Regulation 14 (2)(a),(c) 27 (2)(q)	Ensure that all items of equipment used to lift residents (including manual bath hoists) are subject to regular 6 monthly 'thorough examination' as required by the 'Lifting Operations, Lifting Equipment Regulations'.  (9.3.3 in the Report)	12 Weeks	<i>Kone complete servicing of all equipment every 6 months. Last serviced August 2014.</i>

Announced Estates Inspection to Sunnyside House Residential Care Home on 23 September 2014

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## Standard 29 - Fire Safety

The following requirements and recommendations should be noted for action in relation to Standard 29 - Fire Safety

Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
6	Regulation 27 (4)(b)	<p>Ensure that all bedroom doors throughout the home provide 30 minute fire resistance and are fitted with self-closing devices, in accordance with the latest guidance issued by the Northern Ireland Fire and Rescue Service. Full details may be found at:</p> <p><a href="http://www.rqia.org.uk/cms_resources/door%20closers%20April%202013.pdf">http://www.rqia.org.uk/cms_resources/door%20closers%20April%202013.pdf</a></p> <p>Details of any proposals including the assessment confirming the proposed self-closing device will not impact adversely on the mobility, safety or quality of life of the room occupant should be forwarded to RQIA prior to commencement of the works.</p> <p>(9.4.2 in the Report)</p>	12 Weeks	<p>The Fire Protection upgrade works including the installation of self closing devices to bedroom doors is included in the maintenance programme &amp; will commence on site this financial year. Assessment will be forwarded to RQIA prior to commencement of these works.</p>

Announced Estates Inspection to Sunnyside House Residential Care Home on 23 September 2014

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