



The Regulation and
Quality Improvement
Authority

**THE REGULATION AND QUALITY IMPROVEMENT
AUTHORITY**

9th floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
Tel: 028 9051 7500 Fax: 028 9051 7501

ANNOUNCED ESTATES INSPECTION

Inspection No: IN020744
Establishment ID No: 10626
Name of Establishment: Kingsbridge Private Hospital, Belfast
Date of Inspection: 02 October 2014
Inspector's Names: K. Monaghan

1.0 GENERAL INFORMATION

Name of Hospital:	Kingsbridge Private Hospital
Address:	811-815 Lisburn Road Belfast BT9 7GX
Telephone Number:	028 90 66 78 78
Registered Organisation/Provider:	3fivetwo Medical Ltd (Mr. Mark Simon Regan, Operations Director - Private Sector)
Registered Manager:	Mrs. Sarah Joy Marks
Person in Charge of the Hospital at the time of Inspection:	Mrs. Sarah Joy Marks, Registered Manager
Other person(s) present during inspection:	Mr. J. Mason, Fire Safety Consultant for the Hospital Mr. K. Best, Consultant Architect for the Hospital
Type of establishment:	Independent Hospital
Categories of Care:	AH , AH(DS), PD ,PT (E)
Number of Registered Places:	16
Conditions of Registration:	Independent Hospital with 16 inpatient beds. Registered to provide services as outlined in Appendices 1 - 10 of the Statement of Purpose. The hospital is also registered for six day beds to be accommodated in the day case ward.
Date of previous Estates inspection: (Endoscopy Reprocessing)	17 June 2014
Date and time of inspection:	02 October 2014 (10:00am. – 11:40am.)
Name of Inspector:	K. Monaghan

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 independent health care establishments.

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 INSPECTION BACKGROUND

RQIA received a variation application (Ref. VA 000092) on 08 May 2014 from the Registered Persons. This application related to proposed alterations to the premises being used for the purposes of the hospital to change the layout in a number of areas.

These alteration works were subsequently completed and the revised layout areas were ready for use. This Estates inspection was carried out to review these areas before they are to be used for the purposes of the hospital.

4.0 INSPECTION PURPOSE

The purpose of this inspection was to establish the level of compliance with current legislative requirements and the Minimum Care Standards for Independent Healthcare Establishments issued by the Department of Health, Social Services and Public Safety in July 2014. This was achieved through a process of evaluation of the 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 standard.

The aims of the inspection were to examine the estates related policies, practices and monitoring arrangements for the provision of independent health care establishments, and to determine the provider's compliance with the following:

- The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003,
- The Independent Health Care Regulations (Northern Ireland) 2005
- Minimum Care Standards for Independent Healthcare Establishments (DHSSPS, July 2014)

Other published standards which guide best practice may also be referenced during the inspection process.

5.0 INSPECTION METHODS/PROCESS

Specific methods/processes used in this inspection include the following:

1. Discussions with, Mrs. Sarah Joy Marks, Registered Manager, Mr. J. Mason, Fire Safety Consultant for the Hospital and Mr. K. Best, Consultant Architect for the Hospital
2. A review of the areas of the premises affected by the alterations to change the layout.
3. Evaluation and feedback

Any other information received by RQIA about this regulated establishment has also been considered by the Inspectors in preparing for this inspection.

6.0 CONSULTATION PROCESS

During the course of the inspection, the Inspector spoke to Mrs. Sarah Joy Marks, Registered Manager, Mr. J. Mason, Fire Safety Consultant for the Hospital and Mr. K. Best, Consultant Architect for the Hospital.

7.0 INSPECTION FOCUS

This inspection sought to establish the level of compliance achieved with respect to the following DHSSPS Minimum Care Standards for Independent Healthcare Establishments, July 2014. This inspection focused specifically on the areas of the premises affected by the alterations to change the layout.

Standards inspected:

- Standard 22 The premises and grounds are safe, well-maintained and suitable for their stated purpose.
- Standard 24 Fire safety precautions are in place that reduce the risk of fire and protect patients and clients, staff and visitors in the event of fire.

8.0 SUMMARY

Following this Estates Inspection of the Kingsbridge Private Hospital in Belfast on 02 October 2014, improvements are required to comply with The Independent Health Care Regulations (Northern Ireland) 2005 and the criteria outlined in the following draft minimum standards:

- Standard 22 Premises And Grounds,
- Standard 24 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 Mrs. Sarah Joy Marks, Registered Manager, Mr. J. Mason, Fire Safety Consultant for the Hospital and Mr. K. Best, Consultant Architect for the Hospital, throughout the inspection process.

9.0 INSPECTION FINDINGS

9.1 Recommendations and requirements from previous Estates inspection on 17 June 2014

9.1.1 This Estates inspection focused specifically on the areas of the premises affected by the recent alterations to change the layout in a number of areas. The recommendations and requirements from the previous Estates inspection to this establishment that was carried out on 17 June 2014 were not therefore reviewed during this inspection.

9.2 Standard 22 Premises and Grounds

The premises and grounds are safe, well-maintained and suitable for their stated purpose.

9.2.1 The following issues were identified for attention during this Estates inspection in relation to this standard:

9.2.2 The missing ceiling tile in one of the stores should be reinstated. Reference should be made to item 1 in the attached Quality Improvement Plan.

9.0 INSPECTION FINDINGS CONTINUED

9.2 Standard 22 Premises and Grounds Continued

9.2.3 The alterations to the premises had reduced the number of spaces available in the car park to the rear of the premises. Mrs. Marks however confirmed that the hospital had the use of twenty spaces in the church car park opposite the hospital and plans were being taken forward to provide a further 15 spaces in the hospital's existing car park. The Registered Persons should keep RQIA up to date with progress in relation to this development. Reference should be made to item 2 in the attached Quality Improvement Plan.

9.2.4 The following support documentation in relation to the premises should be forwarded to RQIA:

1. A copy of the final letter of approval from Building Control
2. A certificate in accordance with BS 7273 - 4 2007 for the electromagnetic hold closed fastening on the door to the new administrative facilities

Reference should be made to item 1 in the attached Quality Improvement Plan.

9.2.5 The above issues are detailed in the section of the Quality Improvement Plan entitled 'Standard 22 – Premises and Grounds.

9.3 Standard 24 Fire safety

Fire safety precautions are in place that reduce the risk of fire and protect patients and clients, staff and visitors in the event of fire.

9.3.1 The following issue was identified for attention during this Estates inspection in relation to this standard:

9.3.2 A new waste enclosure facility had been created. The existing fire detection system should be extended to cover this facility. The area opposite the medical gas store should not be used for smoking. Mrs. Marks confirmed that this issue had already been identified and actioned. Reference should be made to item 3 in the attached Quality Improvement Plan.

9.3.3 The above issue is detailed in the section of the Quality Improvement Plan entitled 'Standard 24 – Fire Safety.

10.0 QUALITY IMPROVEMENT PLAN

The details of the Quality Improvement plan appended to this report were discussed with Mrs. Sarah Joy Marks, Registered Manager, Mr. J. Mason, Fire Safety Consultant for the Hospital and Mr. K. Best, Consultant Architect for the Hospital 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 Independent Health Care Regulations (Northern Ireland) 2005 and must be met.

Recommendations are based on the Department of Health, Social Services and Public Safety's draft minimum standards for registration and inspection, promote current good practice and should be considered by the management of the hospital to improve the quality of service experienced by patients.

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
Quality Improvement
Authority

QUALITY IMPROVEMENT PLAN

ANNOUNCED ESTATES INSPECTION

KINGSBRIDGE PRIVATE HOSPITAL, BELFAST RQIA ID 10626

02 OCTOBER 2014

QIP Position Based on Comments from Registered Persons			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.	√	–	√	K. Monaghan	19 January 2015

Announced Estates Inspection to Kingsbridge Private Hospital, Belfast 02 October 2014 (K. Monaghan)

Assurance, Challenge, Improvement in Health and Social Care

NOTES:

The details of this Quality Improvement plan were discussed Mrs. Sarah Joy Marks, Registered Manager, Mr. J. Mason, Fire Safety Consultant for the Hospital and Mr. K. Best, Consultant Architect for the Hospital, as part of the inspection process.

The timescales commence from the date of inspection.

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

Recommendations are based on the Department of Health, Social Services and Public Safety's Draft minimum standards for registration and inspection, promote current good practice and should be considered by the management of the Clinic to improve the quality of the service being provided.

The Registered Provider is required to record comments on the Quality Improvement Plan.

The Quality Improvement Plan should be signed below by the Registered Provider and Registered Manager and returned to 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:

NAME OF REGISTERED MANAGER COMPLETING QIP	Sarah Marks
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	Mark Regan

Announced Estates Inspection to Kingsbridge Private Hospital, Belfast 02 October 2014 (K. Monaghan)

Assurance, Challenge, Improvement in Health and Social Care

ITEM	STANDARD REF/ REGULATION	REQUIRMENTS ACTION TO BE TAKEN BY REGISTERED PROVIDER/ MANAGER	TIMESCALE	DETAILS OF ACTION TAKEN BY REGISTERED PERSON (S)
The following requirements should be noted for action in relation to Standard 22: Premises and Grounds:				
1.	Regulations 25(1) 25(2)(a)	<p>The missing ceiling tile in one of the stores should be reinstated. The following support documentation in relation to the premises should also be forwarded to RQIA:</p> <ol style="list-style-type: none"> 1. A copy of the final letter of approval from Building Control 2. A certificate in accordance with BS 7273 - 4 2007 for the electromagnetic hold closed fastening on the door to the new administrative facilities <p>Reference should be made to sections 9.2.2 and 9.2.4 in the report.</p>	1 Month	<p>Ceiling Tile replaced - Complete</p> <p>Awaiting Certificate from Architect</p> <p>Awaiting Certificate from Architect</p>
2.	Regulation 25(1)	The Registered Persons should keep RQIA up to date with progress in relation to the new car parking development. Reference should be made to section 9.2.3 in the report.	Ongoing	Ground has been prepared for the Car park area. Ongoing..

Announced Estates Inspection to Kingsbridge Private Hospital, Belfast 02 October 2014 (K. Monaghan)

Assurance, Challenge, Improvement in Health and Social Care

ITEM	STANDARD REF/ REGULATION	REQUIREMENTS ACTION TO BE TAKEN BY REGISTERED PROVIDER/ MANAGER	TIMESCALE	DETAILS OF ACTION TAKEN BY REGISTERED PERSON (S)
The following requirements should be noted for action in relation to Standard 24: Fire safety				
3.	Regulation 25(4)(a)	The existing fire detection system should be extended to cover the new waste enclosure facility. Reference should be made to item 9.3.2 in the report.	1 Month	Smoke alarm has been fitted to the Bin store area

Announced Estates Inspection to Kingsbridge Private Hospital, Belfast 02 October 2014 (K. Monaghan)

Assurance, Challenge, Improvement in Health and Social Care