

Announced Variation to Registration Premises Inspection Report 26 June 2017



Park Manor

Type of Service: Nursing Home

Address: 6 Thornhill Road, Dunmurry, Belfast, BT17 9EJ

Tel no: 028 9030 7700

Inspector: Raymond Sayers

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Assurance, Challenge and Improvement in Health and Social Care

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 78 bed Nursinghome situated in Thornhill Road Dunmurry, Belfast, it accommodates a range of nursing care categories including dementia.

3.0 Service details

Registered organisation/registered person: Macklin Group Mr Brian Macklin and Mrs Mary Macklin	Registered manager: Miss Claire Black
Person in charge of the home at the time of inspection: Miss Claire Black	Date manager registered: 14 April 2016
Categories of care: RC-I, RC-PH, NH-I, NH-PH, NH-DE	Number of registered places: 78

4.0 Inspection summary

An announced variation to registration inspection took place on 26 June 2017 from 10.30 to 11.45.

The variation application conversion works adds three beds onto the registration, increasing from 78 to 81 beds.

This inspection was underpinned by The Nursing Homes Regulations (Northern Ireland) 2005 and the Care Standards for Nursing Homes, April 2015.

A nursing care inspection was completed by Lyn Buckley on behalf of the Nursing inspection team, at the same time as this premises inspection. The nursing inspection report will be issued separately from this report.

The variation to registration of Park Manor was granted from a premises perspective following this inspection, upon receipt of a copy of the building control completion certificate on 30 June 2017.

The findings of this report will provide the home 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	2	0

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

5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records: previous premises inspection report, premises inspector variation application evaluation report, and related communications.

During the inspection the inspector met with the Manager, Ms Claire Black and Mrs Mary Macklin, Registered Responsible Person.

The following records were examined during the inspection:

- Northern Ireland Health Technical Memorandum 84 (NIHTM84);
- BS5839 fire detection & alarm alteration verification certificate;
- BS5266 Emergency lighting alteration verification certificate;
- BS7671 periodic inspection report for the electrical installation;
- Legionella risk assessment

The findings of the inspection were provided to the person in charge at the conclusion of the inspection.

6.0 The inspection

6.3 Inspection findings

1. Fire risk assessment

The recommended works action plan appended to the fire risk assessment had not been confirmed as completed.

Areas of good practice

The fire risk assessor was selected from an accredited list of accredited fire risk assessors

Areas for improvement

Fire risk assessment works action plan should be reviewed, evaluated and implemented in a timely manner.

	Regulations	Standards
Total number of areas for improvement	1	0

2. Legionella Risk Assessment

The legionella risk assessment works action plan recommendations were not verified as completed.

Areas of good practice

The legionella risk assessment was completed by an independent consultant.

Areas for improvement

Risk assessment works action plan recommendations should be implemented, action plan recommendations should be verified as completed by a responsible person.

	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 Claire Black, 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 Park Manor. 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 and the 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 providers should confirm that these actions have been completed and return the completed QIP Estates.Mailbox@rqia.org.uk for assessment by the inspector.

RQIA will phase out the issue of draft reports via paperlite in the near future. Registered providers should ensure that their services are opted in for the receipt of reports via Web Portal. If you require further information, please visit www.rqia.org.uk/webportal or contact the web portal team in RQIA on 028 9051 7500.

Quality Improvement Plan

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

<p>Area for improvement 1</p> <p>Ref: Regulation 27.(4)</p> <p>Stated: Firsttime</p> <p>To be completed by: 11 September 2017</p>	<p>The registered person shall implement the recommendations of the fire risk assessment and verify completion on the risk assessment works action plan.</p> <p>Ref: 6.3.1</p>
	<p>Response by registered person detailing the actions taken: Recommendations of fire risk assessments completed and verified on action plan.</p>
<p>Area for improvement 2</p> <p>Ref: Regulations 13(7) 14.(2), (a) & (c)</p> <p>Stated: Firsttime</p> <p>To be completed by: 11 September 2017</p>	<p>The registered person shall implement the recommendations of the legionella risk assessment and verify completion on the risk assessment works action plan.</p> <p>Ref: 6.3.2</p>
	<p>Response by registered person detailing the actions taken: Recommendations of legionella risk assessment completed and verified on works action plan.</p>

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