



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:	16935
Establishment ID No:	1221
Name of Establishment:	Seymour Gardens Residential Home
Date of Inspection:	1 July 2014
Inspector's Name:	Phil Cunningham

1.0 GENERAL INFORMATION

Name of Home:	Seymour Gardens
Address:	Nelson Drive Derry BT47 6ND
Telephone Number:	02871344470
Registered Organisation/Provider:	Western Health and Social Care Trust
Registered Manager:	Deirdre Walker
Person in Charge of the Home at the time of Inspection:	Deirdre Walker
Other person(s) consulted during inspection:	Jackie Gallagher, WHSCT Estates Department
Type of establishment:	Residential Home
Number of Registered Places:	26
Date and time of inspection:	1 July 2014 from 10.00 – 13.30
Date of previous inspection:	22 November 2011
Name of Inspector:	Phil Cunningham

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, 2011)

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 person in charge
- Examination of records
- 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 Deirdre Walker, home Manager and Jackie Gallagher, WHSCT Estates Department.

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 27 - Premises and grounds
- Standard 28 - Safe and healthy working practices
- Standard 29 - Fire Safety

7.0 PROFILE OF SERVICE

Seymour Gardens is a late 1970s purpose-built HSC Trust operated residential care home offering secure and comfortable accommodation to people suffering with dementia. The home is discretely located in a residential area on an enclosed site with controlled access both to the site and to the building. All resident accommodation is provided in single bedrooms on the ground floor, a small first floor is used for staff functions and is not accessed by residents. The home has been continuously improved over the years to meet changing practices in the area of dementia care. The facility is very convenient to local amenities and transport links and is registered to cater for 26 residents.

8.0 SUMMARY

Following the Estates Inspection of Seymour Gardens on 1 July 2014, some improvements are required to comply with the Residential Care Homes Regulations (Northern Ireland) 2005 and the criterion outlined in the following standards:

- Standard 27 - Premises and grounds
- Standard 28 - Safe and healthy working practices
- Standard 29 - Fire Safety

This resulted in three requirements and two recommendations. These are outlined in the Quality Improvement Plan appended to this report.

The Estates Inspector would like to acknowledge the assistance of Deirdre Walker and Jackie Gallagher during the inspection process.

9.0 INSPECTOR'S FINDINGS

9.1 **Recommendations and requirements made following the previous estates inspection.**

Following the inspection carried out at Seymour Gardens Residential Care Home on 22 November 2011, one recommendation and six requirements were made.

The registered manager responded in January 2012 to the Quality Improvement Plan which was included in the report of that inspection and these were discussed during this inspection.

The inspector has assessed that the provider has complied with all items outlined in the Quality Improvement Plan of that inspection.

9.2 **Standard 27 - Premises and grounds - *The premises and grounds are safe, well maintained and remain suitable for their stated purpose***

9.2.1 Records indicate that a range of maintenance routines are in place and these appear to be well bedded in.

The home is in reasonably good decorative order and at the time of inspection, painting was ongoing to several areas in the home.

9.2.2 The home's sanitary accommodation including a number of toilets, bathrooms and shower rooms, while functional and in reasonable condition, contain multiple surface-mounted services including ventilation duct work, plumbing & waste pipework, electrical services etc. These have been modified and added to over the years and appear unsightly. The facilities would benefit greatly from total refurbishment. The home does not enjoy the benefit of en-suite accommodation to bedrooms and the sanitary accommodation is used extensively by all residents on a continuous basis.
See item 1 in the attached Quality Improvement Plan.

9.3 **Standard 28 - Safe and healthy working practices - *The home is maintained in a safe manner***

9.3.1 The legionellae risk assessment was reviewed on 18th February 2013. A number of items are detailed in the action plan of the assessment report. The provider should confirm that these have been addressed as appropriate.
See item 2 in the attached Quality Improvement Plan.

9.3.2 The home uses a washer disinfectant for the cleaning and disinfection of bedpans. Documentation to support the servicing and validation of this was not available.
See item 3 in the attached Quality Improvement Plan.

9.4 **Standard 29: 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 Records indicate good attention to fire safety in the home and the fire risk assessment was reviewed in 10 October 2013. It is good to note that the provider has provided automatic self-closing devices to doors which lead onto escape routes including all bedroom doors and these have been provided with magnetic hold-open devices for ease of passage by residents. This was carried out following direction by the Northern Ireland Fire and Rescue Service which was communicated by RQIA to providers in June 2013.
- 9.4.2 At the time of inspection approximately 12 members of staff have not received fire safety training within required timescales. It is understood that this has been arranged to take place 2nd and 16th July.
See item 4 in the attached Quality Improvement Plan
- 9.4.3 It is unclear whether the person carrying out the home's fire risk assessment holds professional registration or third-party accreditation by a recognized body for fire risk assessment. This was outlined in correspondence from RQIA to all care home providers in January 2013.
See item 5 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 Deirdre Walker 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 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 nursing 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

- for -

Announced Estates Inspection

- of -

Seymour Gardens Residential Home

- on -

1 July 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.	X	X		P Cunningham	21/10/14
C.	Clarification or follow up required on some items.	X		X	<i>P Cunningham</i>	25/9/14

NOTES:

The details of the Quality Improvement Plan were discussed with Deirdre Walker as part of the inspection process.

The timescales commence from the date of inspection.

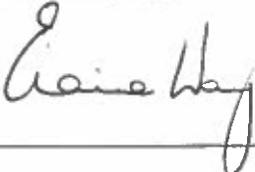
Requirements are based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 and The Residential Homes Regulations (Northern Ireland) 2005 and must be met.

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 residential home to improve the quality of life experienced by residents.

The registered provider is required to record comments on the Quality Improvement Plan.

The Quality Improvement Plan is to 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	Deirdre Walker
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	

Standard 27 - Premises and grounds

The following requirements and recommendations should be noted for action in relation to Standard 27 - Premises and grounds

Item	Standard Reference	Recommendation	Timescale	Details Of Action Taken By Registered Person (S)
1	27.1	Consideration should be given to upgrading all of the home's sanitary accommodation to provide modern facilities. This should include the flush mounting of all engineering services within the rooms and provision of new sanitary ware, fixtures, floor coverings and wall finishes. See 9.2.2 in report	1 year	A minor capital works form has been forwarded on 30/7/14 to upgrade all sanitary accommodation

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)
2	13 (7)	Confirmation is required that any remedial measures identified in the legionellae risk assessment review have been addressed appropriately See 9.3.1 in report	2 months	Estate Services have reviewed remedial measures identified in legionellae risk assessment. A plumber has now been out to look at the water meter pipe with a view to rectifying.
3	13 (7)	Confirm/ensure that the home's washer disinfector is subjected to a suitable regime of servicing and validation checks in line with DHSSPS guidance and that suitable records are retained. See 9.3.2 in report	2 months	In checking on bed pan washer, it was identified by Estate Services that it was not on the current service schedule. The bed pan washer has since been serviced by medical technicians and is also now registered. As a result the washer will be serviced every 3 months.

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)
4	27 (4)(e)	Ensure that all staff have received fire safety training in line with required timescales. see 9.4.2 in report.	1 month	All staff, apart from 4, have now been trained. The last 4 will be trained first week in September due to currently being off on general leave and unpaid leave.
Item	Standard Reference	Recommendations	Timescale	Details Of Action Taken By Registered Person (S)
5	29.1	<p>Ensure that when the fire risk assessment is next reviewed, the person carrying out the review holds professional body registration or third party certification for fire risk assessment and is registered accordingly with the relevant body.</p> <p>Reference should be made to correspondence issued by RQIA to all registered homes on 13 January 2013 and the guidance contained therein:</p> <p>http://www.rqia.org.uk/cms_resources/Competence%20of%20persons%20carrying%20out%20Fire%20Risk%20Assessment.pdf</p> <p>http://www.rqia.org.uk/cms_resources/A%20Guide%20to%20Choosing%20a%20Competent%20Fire%20Risk%20Assessor.pdf</p> see 9.4.3 in report.	On review of the fire risk assessment	Have spoken with Trust fire officer who has informed us that he has been trained for carrying out fire risk assessments. He has applied for registration with appropriate body and is currently waiting for feedback.