



The Regulation and
Quality Improvement
Authority

Saintfield Lodge
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4 Old Saintfield Road
Belfast
BT8 8EY

Inspector: Gavin Doherty
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**Announced Estates Inspection
of
Saintfield Lodge**

10 November 2015

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
Tel: 028 9051 7500 Fax: 028 9051 7501 Web: www.rqia.org.uk

1. Summary of Inspection

An announced estates inspection took place on 10 November 2015 from 10.00 to 12.00. Overall on the day of the inspection the premises supported the delivery of safe, effective and compassionate care. Areas for improvement were identified and are set out in the Quality Improvement Plan (QIP) appended to this report. This inspection was underpinned by the Care Standards for Nursing Homes 2015.

1.1 Actions/Enforcement Taken Following the Last Inspection

Other than those actions detailed in the previous QIP there were no further actions required to be taken following the last inspection.

1.2 Actions/Enforcement Resulting from this Inspection

Enforcement action did not result from the findings of this inspection.

1.3 Inspection Outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	2	0

The details of the QIP within this report were discussed with Melanie Reyes, registered manager and Stevie McCormick, estates manager as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Organisation/Registered Person: Four Seasons Health Care Ltd	Registered Manager: Melanie Reyes
Person in Charge of the Home at the Time of Inspection: Melanie Reyes	Date Manager Registered: 29 July 2013
Categories of Care: NH-MP	Number of Registered Places: 51
Number of Patients Accommodated on Day of Inspection: 51	Weekly Tariff at Time of Inspection: Not ascertained

3. Inspection Focus

The inspection sought to assess progress with the issues raised during and since the previous inspection and to determine if the following standards have been met:

Standard 44: Premises

Standard 47: Safe and Healthy working Practices

Standard 48: Fire safety

4. Methods/Process

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

Prior to inspection the following records were analysed: Previous estates inspection report, statutory notifications over the past 12 months.

During the inspection the inspector met with Melanie Reyes, registered manager and Stevie McCormick, estates manager.

The following records were examined during the inspection: Copies of service records and in-house log books relating to the maintenance and upkeep of the building and engineering services, legionellae risk assessment, and fire risk assessment.

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the home was an unannounced care inspection dated 2 November 2015. The completed QIP is still to be returned and approved by the care inspector for the home.

5.2 Review of Requirements and Recommendations from *the last* Estates Inspection on 29 October 2012

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulation 27	Several of the welds in the recently installed kitchen floor finish have broken down leading to an unacceptable infection control risk. It is essential that these joints are suitably resealed	Met
	Action taken as confirmed during the inspection: Confirmed as completed during inspection.	
Requirement 2 Ref: Regulation 27	Implement the observations and recommendations relating to health and safety, in the most recent thorough examination of the passenger lift (18 October 2012) without further delay.	Met
	Action taken as confirmed during the inspection: Confirmed as completed during inspection.	

5.3 Standard 44: Premises Is Care Safe? (Quality of Life)

A range of documentation in relation to the maintenance and upkeep of the premises was presented for review during this Estates inspection. This documentation included inspection and test reports for various elements of the engineering services and risk assessments. This supports the delivery of safe care.

Is Care Effective? (Quality of Management)

A range of accommodation, facilities and support services is provided in the premises. This supports the delivery of effective care.

Is Care Compassionate? (Quality of Care)

The areas of the premises reviewed during this Estates inspection were well presented, clean and free from malodours. This supports the delivery of compassionate care.

Areas for Improvement

No areas for improvement were identified during this estates inspection.

Number of Requirements	0	Number Recommendations:	0
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5.4 Standard 47: Safe and Healthy Working Practices

Is Care Safe? (Quality of Life)

A range of documentation relating to the safe operation of the premises, installations and engineering services was presented for review during this Estates inspection. This supports the delivery of safe care.

Is Care Effective? (Quality of Management)

The nature and needs of the patients are considered as part of the risk assessment processes and this is reflected in the management of the home. This supports the delivery of effective care.

Is Care Compassionate? (Quality of Care)

There are health & safety procedures and control measures in place which support the delivery of compassionate care. A number of issues were however identified for attention during this Estates inspection. These are detailed in the 'areas for improvement' section below.

Areas for Improvement

The premise's fixed electrical installation was inspected and tested on 30 September 2015. All code 'C1' faults identified during this inspection were made good at the time of the inspection. This is to be commended. However, it is important that the code 'C2' and 'C3' faults identified are also made good in a timely manner and that the installation is deemed to be in a 'satisfactory' condition.

Ensure that the Shower units installed in Shower Rooms 4 and 11 are certified as meeting the requirements of a 'Type 3' Thermostatic Mixing Valve, or replace if necessary. (Requirement 1 in the attached Quality Improvement Plan)

Number of Requirements	1	Number Recommendations:	0
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5.5 Standard 48: Fire Safety

Is Care Safe? (Quality of Life)

A range of fire protection measures are in place for the premises. This includes a fire detection and alarm system, emergency lighting, first aid fire-fighting equipment, structural fire separation and protection to the means of escape. This supports the delivery of safe care. One issue was however identified for attention during this Estates inspection. This is detailed in the 'areas for improvement' section below.

Is Care Effective? (Quality of Management)

The standard used by the registered person to determine the overall level of fire safety within the premises takes account of the interaction between the physical fire precautions, the fire hazards, the number of patients, the management policies and the availability of adequately trained staff. This standard has been referenced in the fire risk assessment. This supports the delivery of effective care.

Is Care Compassionate? (Quality of Care)

The standard used by the registered persons to determine the extent of fire safety protection measures that are appropriate for the premises recognises the need to maintain a homely, non-institutionalised environment. This supports the delivery of compassionate care.

Areas for Improvement

The Emergency lighting installation received its annual inspection and test on 29 July 2015. Ensure that all outstanding remedial works relating to this inspection are undertaken without further delay.

(Requirement 2 in the attached Quality Improvement Plan)

Number of Requirements	1	Number Recommendations:	0
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5.6 Additional Areas Examined

No additional areas were examined during this estates inspection

6. Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Melanie Reyes, registered manager and Stevie McCormick, estates manager as part of the inspection process. The timescales commence from the date of inspection.

The registered person/manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered person/manager to ensure that all requirements and recommendations contained 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 your premises. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises the RQIA would apply standards current at the time of that application.

6.1 Statutory Requirements

This section outlines the actions which must be taken so that the registered person/s meets legislative requirements based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, Nursing Homes Regulations (Northern Ireland) 2005.

6.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and Care Standards for Nursing Homes 2015. They promote current good practice and if adopted by the registered person may enhance service, quality and delivery.

6.3 Actions Taken by the Registered Persons

The QIP should be completed by the registered manager to detail the actions taken to meet the legislative requirements stated. The registered person will review and approve the QIP to confirm that these actions have been completed by the registered manager. Once fully completed, the QIP will be returned to estates.mailbox@rqia.org.uk and assessed by the inspector.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the home. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not absolve the registered person/manager from their responsibility for maintaining compliance with minimum standards and regulations. It is expected that the requirements and recommendations set out in this report will provide the registered person/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the home.

Quality Improvement Plan			
Statutory Requirements			
Requirement 1 Ref: Regulation 27(2) Stated: First time To be Completed by: 5 January 2016	Ensure that the shower units installed in shower rooms four and 11 are certified as meeting the requirements of a 'type 3' Thermostatic Mixing Valve, or replace if necessary.		
	Response by Registered Manager Detailing the Actions Taken: Two new valves for the shower units are on schedule to be installed on the first week of January 2016 .		
Requirement 2 Ref: Regulation 27(2) Stated: First time To be Completed by: 5 January 2016	The Emergency lighting installation received its annual inspection and test on 29 July 2015. Ensure that the outstanding remedial works relating to this inspection are undertaken without further delay.		
	Response by Registered Manager Detailing the Actions Taken: Addressed. All remedial works stipulated in the Emergency lighting annual inspection addressed and completed 14 th December 2015		
Registered Manager Completing QIP	Melanie Reyes	Date Completed	21.12.15
Registered Person Approving QIP	Dr Claire Royston	Date Approved	22.12.15
RQIA Inspector Assessing Response	Gavin Doherty	Date Approved	7/1/2016

Please ensure the QIP is completed in full and returned to estates.mailbox@rqia.org.uk from the authorised email address