



The Regulation and
Quality Improvement
Authority

Inspector: Gavin Doherty
Inspection ID: IN021550

Jordanstown
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**Announced Estates Inspection
of
Jordanstown Nursing Home**

2 June 2015

The Regulation and Quality Improvement Authority
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1. Summary of Inspection

An announced estates inspection took place on 2 June 2015 from 10.30 to 12.30. 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	5	0

The details of the QIP within this report were discussed with Mrs Jean Steele, Registered Manager as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Organisation/Registered Person: Dr Claire Royston, Four Seasons Health Care	Registered Manager: Mrs Jean Steele
Person in Charge of the Home at the Time of Inspection: Mrs Jean Steele	Date Manager Registered: 1 April 2005
Categories of Care: NH-I	Number of Registered Places: 53
Number of Patients Accommodated on Day of Inspection: 47	Weekly Tariff at Time of Inspection: Not confirmed

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 include the following:

Prior to inspection the following records were analysed:

- Previous Estate's inspection report
- Statutory notifications over the past 12 months

During the inspection the inspector did not meet with any residents, care staff, visiting professionals or resident's representatives. The inspector spoke with Mr Gerry Hegarty, Estates Manager with Four Seasons Health Care.

The following records were examined during the inspection:

- Fire Risk assessment
- Fire Safety service records and in-house log books
- Control of Legionella Risk Assessment and associated records
- Mechanical & Electrical Certificates and associated records
- Service Certificates for the lifting equipment and passenger lift

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the home was an unannounced secondary care inspection dated 24 February 2015. The completed QIP was returned and approved by the specialist inspector on 17 April 2015.

5.2 Review of Requirements and Recommendations from the last Estates Inspection

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulation 27(2)	Replace the vanity unit in Bedroom 31. Ensure a survey of all the bedroom vanity units is carried out and that any other such units are also replaced.	Met
	Action taken as confirmed during the inspection: The inspector confirmed during the inspection that the vanity units in the home had been replaced or refurbished as necessary.	
Requirement 2 Ref: Regulation 27(2)	Replace the bedside drawer unit in Bedroom 13.	Met
	Action taken as confirmed during the inspection: The inspector confirmed during the inspection that the bedroom furniture throughout the home had been upgraded.	
Requirement 3 Ref: Regulation 14(2)	Suitably seal or replace the wooden laundry shelving, in accordance with current infection control best practice.	Met
	Action taken as confirmed during the inspection: Confirmed during inspection.	
Requirement 4 Ref: Regulation 14(2)	Replace the existing floor finish in the service corridor with a suitable slip resistant floor finish.	Met
	Action taken as confirmed during the inspection: Confirmed during inspection.	

Requirement 5 Ref: Regulation 14(2)	Provide confirmation that all remedial works required as a result of the most recent fixed electrical wiring inspection have been completed and that the system is in satisfactory condition.	Met
	Action taken as confirmed during the inspection: A certificate dated 9 September 2010 stating the electrical installation was in a satisfactory condition was presented at the inspection.	
Requirement 6 Ref: Regulation 14(2)	Closely monitor the existing stair and 1st floor landing carpets, ensuring that they are stretched and adjusted to provide a level surface and do not present a tripping hazard.	Met
	Action taken as confirmed during the inspection: The inspector confirmed that the flooring in all circulation areas had been replaced following the previous estates inspection.	
Requirement 7 Ref: Regulation 27(4)	Provide confirmation that all remedial works required as a result of the most recent emergency lighting and alarm and detection system inspections, have been completed.	Met
	Action taken as confirmed during the inspection: Confirmed 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 deemed necessary as a result of this inspection. This is to be commended.

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 and 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 registered manager must ensure that the remedial works required as a result of the most recent risk assessment (20 February 2015) for the 'Control of legionella bacteria in the home's hot and cold water systems' are undertaken within the stipulated time frame.

The registered manager must ensure that the remedial works required as a result of the most recent gas safe inspection (9 March 2015) are undertaken in a timely manner.

Number of Requirements	2	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.

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. 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 registered manager must ensure that the remedial works required as a result of the most recent fire risk assessment (21 May 2015) are undertaken within the stipulated time frame.

The most recent certificate for the inspection and testing of the home's emergency lighting installation was not available at the time of the inspection. Assurances were provided that this inspection had been undertaken and the registered manager agreed to provide confirmation of the same to RQIA.

The annual servicing of the premises portable fire-fighting equipment was last carried out in April 2014 and is now overdue. Assurances were given at the time of the inspection that this work would be carried out without further delay.

Number of Requirements	3	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 Mrs Jean Steele, Registered 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	
<p>Requirement 1</p> <p>Ref: Regulation 27(2)</p> <p>Stated: First time</p> <p>To be Completed by: As stipulated in risk assessment</p>	<p>The registered manager must ensure that the remedial works required as a result of the most recent risk assessment (20 February 2015) for the 'Control of legionella bacteria in the home's hot and cold water systems' are undertaken within the stipulated time frame.</p> <p>Response by Registered Manager Detailing the Actions Taken: All major legionella works carried out 2014. Barry McDermott has programme of outstanding works for new report to be completed over next 6-9 months.</p>
<p>Requirement 2</p> <p>Ref: Regulation 27(2)</p> <p>Stated: First time</p> <p>To be Completed by: 28 July 2015</p>	<p>The registered manager must ensure that the remedial works required as a result of the most recent gas safe inspection (9 March 2015) are undertaken in a timely manner.</p> <p>Response by Registered Manager Detailing the Actions Taken: Huttons to send cost. Will be completed in next 4 weeks.</p>
<p>Requirement 3</p> <p>Ref: Regulation 27(4)</p> <p>Stated: First time</p> <p>To be Completed by: As stipulated in risk assessment</p>	<p>The registered manager must ensure that the remedial works required as a result of the most recent fire risk assessment (21 May 2015) are undertaken within the stipulated time frame.</p> <p>Response by Registered Manager Detailing the Actions Taken: Manager aware of works to be completed - all should be completed within the next 2-3 months.</p>
<p>Requirement 4</p> <p>Ref: Regulation 27(4)</p> <p>Stated: First time</p> <p>To be Completed by: 28 July 2015</p>	<p>The registered manager must provide confirmation that the most recent certificate for the inspection and testing of the home's emergency lighting installation is in place and that any remedial works required have been undertaken.</p> <p>Response by Registered Manager Detailing the Actions Taken: Awaiting report from MITIE. Completed 28/05/15 - no remedials.</p>

Requirement 5 Ref: Regulation 27(4) Stated: First time To be Completed by: 7 July 2015	The registered manager must provide confirmation that the annual servicing of the premises portable fire-fighting equipment has been carried out.		
	Response by Registered Manager Detailing the Actions Taken: Now complete 05/06/15		
Registered Manager Completing QIP	Jean Steele	Date Completed	31/08/15
Registered Person Approving QIP	Dr M Claire Royston	Date Approved	01/09/2015
RQIA Inspector Assessing Response	P Cunningham	Date Approved	*7/9/15

**Several items requiring follow up or clarification*