



The Regulation and
Quality Improvement
Authority

**THE REGULATION AND QUALITY IMPROVEMENT
AUTHORITY**

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ANNOUNCED ESTATES INSPECTION

Inspection No:	20463
Establishment ID No:	1443
Name of Establishment:	Clareview House Nursing Home, Ballyclare
Date of Inspection:	12 August 2014
Inspector's Name:	K. Monaghan

1.0 GENERAL INFORMATION

Name of Home:	Clareview House Nursing Home
Address:	105 Doagh Road Ballyclare BT39 9ES
Telephone Number:	028 93 34 96 94
Registered Responsible Individual:	Ms. Naomi Carey, Hutchinson Homes Ltd
Registered Manager:	Ms. Sharon Bell
Person in Charge of the Home at the time of Inspection:	Ms. Sharon Bell, Registered Manager
Other person(s) present during inspection:	Mr. Stephen Montgomery who deals with the premises issues in relation to the home
Type of establishment:	Nursing Home
Categories of Care:	NH-PH(E), NH-PH, NH-I, RC-PH(E), RC-PH & RC-I
Conditions of Registration:	A maximum of 8 residents in categories RC-I and RC-PH (E)
Number of Registered Places:	35
Date of Previous Estates Inspection:	12 August 2013
Date and time of Inspection:	12 August 2014 (10:30am. – 12:30pm.)
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 nursing 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 nursing homes, and to determine the provider's compliance with the following:

- The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003,
- The Nursing Homes Regulations (Northern Ireland) 2005 and
- Nursing Homes Minimum Standards (DHSSPS, 2008)

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:

1. Discussion with Ms. Sharon Bell, Registered Manager
2. Examination of records,
3. Inspection of the home internally and externally. Patients' private bedrooms were only inspected when unoccupied and permission was granted
4. Evaluation and feedback

Any other information received by RQIA about this regulated establishment 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 Ms. Sharon Bell, Registered Manager. Mr. Stephen Montgomery was also present for a brief time at the end of the inspection.

6.0 INSPECTION FOCUS

This inspection sought to establish the level of compliance achieved with respect to the following DHSSPS Nursing Homes Minimum Standards with the focus on assessing progress with the issues raised during and since the previous inspection.

Standards inspected:

- Standard 32 - Premises and grounds,
- Standard 35 - Safe and healthy working practices and
- Standard 36 - Fire Safety

The specific focus during this Estates inspection was on following up progress in relation to the issues included in the Quality Improvement Plan for the previous Estates inspection to the premises that was carried out on 12 August 2013.

7.0 PROFILE OF SERVICE

Clareview House Private Nursing Home is situated just off the Doagh Road in the outskirts of Ballyclare Town centre. It is on a main bus route to Ballymena, Antrim and Belfast. It was formerly a private dwelling and has been adapted and extended to provide nursing and residential care.

Clareview House is a two storey nursing home providing communal lounges, dining facilities, a range of bath, shower and toilet facilities and accommodation in single bedrooms. Stairs and a passenger lift access the first floor of the home. Car parking facilities are available.

The home is registered to provide care for persons under the following categories of care:

Nursing Care (NH)

- I Old age not falling into any other category
- PH Physical disability other than sensory impairment (one patient)
- PH (E) Physical disability other than sensory impairment – over 65 years

Residential Care (RC)

- I Old age not falling into any other category
- MP (E) Mental disorder excluding learning disability or dementia – over 65 years
- PH (E) Physical disability other than sensory impairment – over 65 years

The ownership of the home changed in October 2013. Ms. Naomi Carey, Hutchinson Homes Ltd is now the Registered Responsible Individual and Mrs Sharon Bell is the Registered Manager for the home.

8.0 SUMMARY

It is good to report that an extensive amount of improvement work had recently been carried out in relation to the premises. Work on a major programme of refurbishment was still ongoing with further improvements planned for the months ahead. This is to be commended.

Following this Estates Inspection of Clareview House Nursing Home in Ballyclare on 12 August 2014, improvements are required to comply with the Nursing Homes Regulations (Northern Ireland) 2005 and the criteria outlined in the following standards:

- Standard 32 - Premises and grounds
- Standard 35 - Safe and healthy working practices
- Standard 36 - Fire Safety

This resulted in seven requirements. These are outlined in the quality improvement plan appended to this report.

The Estates Inspector would like to acknowledge the assistance of Ms. Sharon Bell, Registered Manager, during the inspection process.

9.0 INSPECTION FINDINGS

9.1 Recommendations and requirements from previous Estates inspection on 12 August 2013

9.1.1 The previous Estates inspection to this home was carried out on 12 August 2013. The following issues should be noted in relation to the items included in the Quality Improvement Plan for the Estates inspection of the home on 12 August 2013:

9.1.2 **Previous QIP Item 1.** *A comprehensive programme of refurbishment based on firm timescales should be implemented for the home. A copy of this refurbishment programme should be forwarded to RQIA.*

9.1.3 It is good to report that a comprehensive programme of refurbishment had been implemented in the home. The work to most of the rooms identified for attention in the report for the previous Estates inspection had been completed and arrangements were in place for the refurbishment work to continue until all parts of the premises have been brought up to standard. This is to be commended.

9.0 INSPECTION FINDINGS CONTINUED

9.1 Recommendations and requirements from previous Estates inspection on 12 August 2013

- 9.1.4 **Previous QIP Item 2.** *A comprehensive programme of floor covering upgrading based on firm timescales should be implemented for the home. A copy of this programme should be forwarded to RQIA.*
- 9.1.5 It is good to report that a comprehensive programme of floor covering upgrading had been implemented in the home. The work to most of the areas identified for attention in the report for the previous Estates inspection had been completed and arrangements were in place for the floor covering work to continue until all parts of the premises have been brought up to standard. The new carpet for the front stairs, for example; was to be fitted the day following this Estates inspection (13 August 2014). This is to be commented.
- 9.1.6 **Previous QIP Item 3.** *The gutters should be re-cleaned. Any remedial works to the gutters and downpipes should also be carried out.*
- 9.1.7 The gutters had been cleaned. Remedial works to the external envelope of the building were also in the final stages of completion.
- 9.1.8 **Previous QIP Item 4.** *The wall at the low level pipe in the sluice at bedroom 1 should be made good.*
- 9.1.9 The wall at the low level pipe in the sluice at bedroom 1 had been made good.
- 9.1.10 **Previous QIP Item 5.** *The refurbishment works in bathroom 8 on the first floor should be completed. The floor covering in toilet 2 on the ground floor should be resealed at the WC. The support frame at this WC should also be replaced. In addition the double glazed window in bedroom 20 should be replaced (defective seal).*
- 9.1.11 The refurbishment works in bathroom 8 on the first floor had been completed. The floor covering in toilet 2 on the ground floor still required attention and the support frame at this WC had not been replaced. Bedroom 20 was not reviewed during this Estates inspection. Mrs. Bell however confirmed that the double glazed window unit in this bedroom had been replaced. Mrs. Bell also confirmed that plans were being made to replace all of the roof windows in the future. The works to the floor covering in toilet 2 on the ground floor should be completed and the support frame at this toilet should be replaced. Reference should be made to item 1 in the Quality Improvement Plan.

9.0 INSPECTION FINDINGS CONTINUED

9.1 Recommendations and requirements from previous Estates inspection on 12 August 2013

9.1.12 **Previous QIP Item 6.** *Remedial works should be carried out to resolve the poor condition of the gable wall internal surface in the stairs at bedroom 3. The patio area outside the dining room should also be improved.*

9.1.13 Remedial works were ongoing at the time of this Estates inspection in relation to these issues. These works were well advanced with completion anticipated in the very near future. Completion should be confirmed to RQIA. Reference should be made to item 1 in the Quality Improvement Plan.

9.1.14 **Previous QIP Item 7.** *The pipes to the radiators should be checked and remedial works should be carried out to ensure that all of the pipework is in good condition.*

9.1.15 Remedial works had been carried out to a number of the radiator pipes. Mrs. Bell confirmed that the pipework in each room was being checked and replaced if required prior to the fitting of the new floor coverings in each room.

9.1.16 **Previous QIP Item 8.** *The Registered Persons should liaise with the proprietors of the neighboring premises with a view to having the trees cut back to improve the outlook and the amount of natural light in the premises. The action to be taken to address this issue should be confirmed to RQIA.*

9.1.17 The trees had been cut back.

9.1.18 **Previous QIP Item 9.** *A programme of work to provide a bitmac surface to the section of the hard surface landscape at the front of the home which was finished in loose stone should be forwarded to RQIA.*

9.1.19 Improvement works had been carried out to the grounds. This work included the erection of additional fencing. The bitmac to the loose stone area had still however to be completed. The current proposals in relation to this issue should be confirmed to RQIA. Reference should be made to item 1 in the Quality Improvement Plan.

9.1.20 **Previous QIP Item 10.** *The overflow pipe at the gable to the original section of the premises opposite Ballyclare Care should be investigated and remedial works should be carried out as required.*

9.1.21 The issue in relation to the overflow pipe had been addressed.

9.0 INSPECTION FINDINGS CONTINUED

9.1 Recommendations and requirements from previous Estates inspection on 12 August 2013

9.1.22 **Previous QIP Item 11.** *Appropriate remedial action should be taken in relation to the following:*

- *Dimmer switch in bedroom 6*
- *Skirting board in one of the corners of bedroom 8*
- *Nurse call unit in bedroom 8*
- *Chair and bin in bedroom 16*
- *Chairs and food trolley in the dining room*
- *Vanity units in bedroom 2, 17, 20, 22, 23*
- *Lights in bathrooms 3 and 7*
- *Beds in bedrooms 2, 10, 12, 13, 17,*
- *Bedside unit in bedroom 12*
- *Curtains in various rooms*
- *Lock on door to store opposite toilet 1*
- *Carpet in ground floor lounge (threading at joint)*
- *Corridor lights beside sluice on ground floor*
- *Wash basin overflows (require deep cleaning)*
- *Shower cubicle and shower chair in shower room 5*

9.1.23 It is good to report that most of these issues had been addressed and further action was ongoing to complete the remaining issues. The new food trolley, for example; was delivered at the time of this Estates inspection. There was also a programme of work in progress to replace the vanity units in the bedrooms. This will fully address the overflow issue.

9.1.24 **Previous QIP Item 12.** *The outside of the original section of the home should be repainted.*

9.1.25 External repainting had been completed. This work has greatly improved the overall appearance of the building.

9.0 INSPECTION FINDINGS CONTINUED

9.1 Recommendations and requirements from previous Estates inspection on 12 August 2013

9.1.26 **Previous QIP Item 13.** *A further check should be carried out to the window openings to ensure that they are all controlled to a safe point of opening with a maximum clear opening of 100mm. The restrictors should not be easy to disconnect. Particular attention should be given to the window openings in bedroom 26 in this regard.*

9.1.27 The windows in bedroom 26 were reviewed during this Estates inspection. The opening width of one of the windows in this bedroom exceeded the 100mm maximum standard. All of the window openings throughout the premises should be rechecked and further adjustments should be carried out to the windows as required. The maximum clear opening width should not exceed 100mm. Guidance in relation to the control of window openings is available via the following link on the RQIA website:

http://www.rqia.org.uk/cms_resources/window%20restrictors.pdf

Reference should be made to item 4 in the Quality Improvement Plan.

9.0 INSPECTION FINDINGS CONTINUED

9.1 Recommendations and requirements from previous Estates inspection on 12 August 2013

9.1.28 Previous QIP Item 14. *Copies of the following documents should be forwarded to RQIA:*

- *Thorough examination report for the passenger lift*
- *Inspection and test report for the general electrical installation*
- *'Gas Safe' inspection reports for the gas equipment/installation in the kitchen and laundry*
- *Service report for the heating boiler*
- *Risk assessment for the prevention or control of legionella bacteria in the water systems*
- *List for the first aid firefighting equipment*
- *Fire risk assessment report*
- *List used for checking the final exit doors*

9.1.29 A thorough examination of the passenger lift was completed on 04 October 2013. Mrs. Bell confirmed that the observations in section 7 of this report had been addressed. The report for the most recent thorough examination of the passenger lift was not presented for review during this Estates inspection. Subsequent to this Estates inspection Mrs. Bell confirmed to RQIA by email that the most recent thorough examination of the passenger lift was completed on 31 July 2014. The fixed wiring installation was inspected and tested on 30 July 2014. The report for this work identified a number of issues for attention. Work in relation to these issues which also included the replacement of a number of extract fans was ongoing at the time of this Estates inspection. Completion should be confirmed to RQIA. Mrs. Bell confirmed that the heating boiler had been replaced at the end of 2013 and the next routine service was scheduled for October 2014. The most recent gas safety inspection was completed on the 28 July 2014 and the most recent legionella risk assessment was completed on 19 June 2013. Lists for the first aid fire-fighting equipment and the final exit doors were not presented for review during this Estates inspection. Subsequent to this Estates inspection, Mrs. Bell confirmed to RQIA by email that lists for the first aid fire-fighting equipment and the final exit doors were available in the home. Reference should be made to item 5 in the Quality Improvement Plan.

9.0 INSPECTION FINDINGS CONTINUED

9.1 Recommendations and requirements from previous Estates inspection on 12 August 2013

9.1.30 **Previous QIP Item 15.** *The premises should be deep cleaned. In addition to this deep clean, the cleaning arrangements for the premises should be reviewed and revised as required. This review should include the adequacy of the cleaning facilities /cleaning equipment, the cleaning specification for each of the different types of rooms, the ongoing inspection of the cleaning work and the auditing arrangements in relation to the cleaning standards being achieved in the home. Completion of the deep clean and the outcome of the review should be confirmed to RQIA.*

9.1.31 The cleaning arrangements in the home had been reviewed and improved.

9.1.32 **Previous QIP Item 16.** *The corridor outside the laundry should be kept clear.*

9.1.33 The corridor outside the laundry was clear at the time of this Estates inspection.

9.1.34 **Previous QIP Item 17.** *A fire detector should be installed in the store opposite the visitor's room on the ground floor.*

9.1.35 A fire detector had not been installed in the store opposite the visitor's lounge. A fire detector should be installed in this store. Reference should be made to item 6 in the Quality Improvement Plan.

9.1.36 **Previous QIP Item 18.** *Multi way electrical adaptors should not be used in the home. Consideration should be given to the installation of some addition fixed power points.*

9.1.37 Although bedrooms 8 and 17 were not specifically reviewed during this Estates inspection for the use of multi way electrical adaptors, no multi way electrical adaptors were observed in the home during this Estates inspection.

9.0 INSPECTION FINDINGS CONTINUED

9.1 Recommendations and requirements from previous Estates inspection on 12 August 2013

9.1.38 **Previous QIP Item 19.** *The missing section of the smoke seal for the meeting edges of the double doors to the lounge on the ground floor should be replaced.*

9.1.39 Part of this missing smoke seal had been replaced. Further works should be carried out to ensure that a smoke seal is provided along the complete length of the meeting edges of these double doors. Reference should be made to item 7 in the Quality Improvement Plan.

9.1.40 The above issues are restated where appropriate in the relevant sections of the attached Quality Improvement Plan.

9.2 Standard 32 - Premises and grounds

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

9.2.1 Since the previous Estates inspection to the premises extensive internal and external redecoration and refurbishment had been completed. New signage and a new visitor's toilet had been provided recently in the home. Mrs. Bell confirmed that the refurbishment works will continue, for example; the new carpet for the front stairs was to be fitted the day following this Estates inspection (13 August 2014).

9.2.2 Some changes had been made to the layout of the home. Up to date floor plans for the home should be forwarded to RQIA. The Registered Persons should also follow up the need to apply for a variation with the RQIA Registration team. The bathrooms, shower rooms and toilets should be renumbered. Reference should be made to item 2 in the Quality Improvement Plan.

9.2.3 One of the windows in bedroom 13 was broken. This should be repaired. The fixings for the toilet in the shower room at bedroom 13 should also be replaced. Reference should be made to item 3 in the Quality Improvement Plan.

9.2.4 The above issues where appropriate are detailed in the section of the attached quality improvement plan entitled 'Standard 32 - Premises and grounds'.

9.0 INSPECTION FINDINGS CONTINUED

9.3 Standard 35 - Safe and healthy working practices

The home is maintained in a safe manner

- 9.3.1 It is good to report that new soap dispensers and hand towel dispensers had recently been installed throughout the premises. New bedside lights and new light switches where required had been installed recently. This is to be commended.
- 9.3.2 The following issue should be noted for attention in relation to this standard:
- 9.3.3 There was some water on the floor of the boiler room. This should be investigated and remedial works should be completed as required. Reference should be made to item 5 in the Quality Improvement Plan.
- 9.3.4 The above issue is detailed in the section of the attached quality improvement plan entitled 'Standard 35 - Safe and healthy working practices'.

9.4 Standard 36: 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 The following issues should be noted in relation to this standard:
- 9.4.2 The door to the domestic store at the front reception area did not have a smoke seal in place. A smoke seal should be fitted to this door. Reference should be made to item 7 in the Quality Improvement Plan.

9.0 INSPECTION FINDINGS CONTINUED

9.4 Standard 36: Fire safety continued

- 9.4.3 The drawing for the fire detection and alarm system should be updated to reflect the current layout of the home. Reference should be made to item 7 in the Quality Improvement Plan.
- 9.4.4 The door to bedroom 22 and the door to the laundry were propped open. Fire doors should not be propped open. Mrs. Bell confirmed that there were plans in place to install an appropriate hold open device linked to the fire detection and alarm system on the door to the laundry. The need for an appropriate hold open device linked to the fire detection and alarm system on the door to bedroom 22 should also be assessed. Reference should be made to item 7 in the Quality Improvement Plan.
- 9.4.5 The above issues are detailed in the section of the attached quality improvement plan entitled 'Standard 35 - Safe and healthy working practices'.

10.0 QUALITY IMPROVEMENT PLAN

The details of the Quality Improvement plan appended to this report were discussed with Ms. Sharon Bell, Registered Manager, 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 Nursing 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 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

CLAREVIEW HOUSE NURSING HOME, BALLYCLARE RQIA ID 1443

12 AUGUST 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	17 October 2014

NOTES:

The details of the quality improvement plan were discussed with Ms. Sharon Bell, Registered Manager, 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 Nursing 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 patients.

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	Sharon Bell
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	Naomi Carey

Announced Estates Inspection to Clareview House Nursing Home, Ballyclare 12 August 2014 (K. Monaghan)

Assurance, Challenge, Improvement in Health and Social Care

The following requirements should be noted for action in relation to Standard 32 – Premises and grounds:

Item	Regulation Reference	Restated Requirements	Timescale	Details Of Action Taken By Registered Person (S)
1.	Regulations 13(7) 27(2)(b)	The works to the floor covering in toilet 2 on the ground floor should be completed and the support frame at this toilet should be replaced. Completion of the remedial works in relation to the gable wall internal surfaces in the stairs at bedroom 3 should be confirmed to RQIA. The current proposals in relation to the resurfacing of the loose stone area should also be confirmed to RQIA. Reference should be made to sections 9.1.11, 9.1.13 and 9.1.19 in the report.	1 Month	Floor covering completed and toilet support frame replaced in toilet 2 Remedial works to the internal gable wall have been completed. Resurfacing of the loose stone area will be completed once all the major works in and around the home have been completed. Directors are aware of this.
Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
2.	Regulations 32(h)	Up to date floor plans for the home should be forwarded to RQIA. The Registered Persons should also follow up the need to apply for a variation with the RQIA Registration team. The bathrooms, shower rooms and toilets should be renumbered. Reference should be made to section 9.2.2 in the report.	1 Month	Up to date floor plans are being sourced from the architect as per Mr S Montgomery..Director.

Announced Estates Inspection to Clareview House Nursing Home, Ballyclare 12 August 2014 (K. Monaghan)

Assurance, Challenge, Improvement in Health and Social Care

The following requirements should be noted for action in relation to Standard 32 – Premises and grounds:

Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
3.	Regulations 13(7) 27(2)(b) 27(2)(c)	The broken window in bedroom 13 should be repaired. The fixings for the toilet in the shower room at bedroom 13 should also be replaced. Reference should be made to section 9.2.3 in the report.	1 Month	Broken window has been repaired Fixings for toilet in the shower room at Bedroom 13 have been replaced.

The following requirements should be noted for action in relation to Standard 35 - Safe and healthy working practices:

Item	Regulation Reference	Restated Requirements	Timescale	Details Of Action Taken By Registered Person (S)
4.	Regulations 14(2)(a) 14(2)(c)	All of the window openings throughout the premises should be rechecked and further adjustments should be carried out to the windows as required. The maximum clear opening width should not exceed 100mm. Guidance in relation to the control of window openings is available via the following link on the RQIA website: http://www.rqia.org.uk/cms_resources/window%20restrictors.pdf Reference should be made to section 9.1.27 in the report.	1 Month	Bedroom 26 has had the opening width corrected as per the guidance on control of window openings. All windows being checked on a regular basis by the maintenance man.

The following requirements should be noted for action in relation to Standard 35 - Safe and healthy working practices:

Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
5.	Regulations 14(2)(a) 14(2)(c) 27(2)(q)	Completion of the work in relation to fixed wiring installation should be confirmed to RQIA. The cause of the water on the floor of the boiler room should be investigated and remedial works should be completed as required Reference should be made to sections 9.1.29 and 9.3.3 in the report.	1 Month	Fixed wiring inspection and testing completed on 30th July 2014 by Sentor. Remedial work in proress by Sentor and electrician. Completion and issue of certificate will be confirmed to Estates Inspector Mr Monaghan. Plumber has completed remedial works to address the water on the floor of boiler room.

The following requirement should be noted for action in relation to Standard 36 - Fire Safety:

Item	Regulation Reference	Restated Requirements	Timescale	Details Of Action Taken By Registered Person (S)
6.	Regulations 27(4)(b) 27(4)(d)(i)	A fire detector should be installed in the store opposite the visitor's room on the ground floor. Reference should be made to section 9.1.35 in the report.	1 Month	Fire detector has been installed.

Announced Estates Inspection to Clareview House Nursing Home, Ballyclare 12 August 2014 (K. Monaghan)

Assurance, Challenge, Improvement in Health and Social Care

The following requirement should be noted for action in relation to Standard 36 - Fire Safety:

Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
7.	Regulations 27(4)(b) 27(4)(c) 27(4)(d)(i) 27(4)(d)(iv)	The missing section of the smoke seal for the meeting edges of the double doors to the lounge on the ground floor should be replaced. A smoke seal should be fitted to the door to the domestic store at the front reception area. Fire doors should not be propped open. The need for an appropriate hold open device linked to the fire detection and alarm system on the door to bedroom 22 should be assessed. The drawing for the fire detection and alarm system should be updated to reflect the current layout of the home. Reference should be made to sections 9.1.39, 9.4.2 9.4.3 and 9.4.4 in the report.	1 Month & Ongoing	Smoke seal has been replaced. Smoke seal has been fitted to the domestic store. Fire dor guards in place for the bedrooms that residents request to have their door open at all times when they are in it and new devices connected to the fire alarm system being installed in strategic areas such as the dinning room nurses station, kitchen, managers office treatment room.