



The Regulation and
Quality Improvement
Authority

**THE REGULATION AND QUALITY IMPROVEMENT
AUTHORITY**

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ANNOUNCED ESTATES INSPECTION

Inspection No: 15558
Establishment ID No: 1491
Name of Establishment: Mountvale Nursing Home, Dromore
Date of Inspection: 15 August 2013
Inspector's Name: K. Monaghan

1.0 GENERAL INFORMATION

Name of Home:	Mountvale Nursing Home
Address:	Brewery Lane Meeting Street Dromore BT25 1AH
Telephone Number:	028 92 699 480
Registered Organisation/Provider:	Mr William Trevor Gage
Registered Manager:	Mrs. Linda Kennedy
Person in Charge of the Home at the time of Inspection:	Mrs. Linda Kennedy, Registered Manager
Other person(s) present during inspection:	N/A
Type of establishment:	Nursing Home
Categories of Care:	NH-I ,NH-PH ,NH-PH(E) ,RC-I
Conditions of Registration:	There may be a maximum of 5 residents accommodated within category RC-I
Number of Registered Places:	51
Date of previous inspection:	20 July 2010
Date and time of inspection:	15 August 2013 (10:30am. – 1:30pm.)
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 Mrs. Linda Kennedy, Registered Manager
2. Inspection of the home internally and externally. Patients' private bedrooms were only inspected when unoccupied and permission was granted
3. 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 Mrs. Linda Kennedy, Registered Manager.

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

7.0 PROFILE OF SERVICE

Mountvale Private Nursing Home is located centrally in Dromore, County Down and is close to main transport routes and local amenities.

The home can provide care for a maximum of 51 persons. Five of the 51 beds are registered to support residential care if required. When beds are available, respite care is regularly provided. The home no longer provides a day care service.

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

Nursing Care

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

Residential Care

- RC - I Old age not falling into any other category. Maximum of 5 residents

The facility is a two storey building comprising of forty-seven single bedrooms and two double bedrooms, three sitting rooms, visitor's area, two dining rooms, kitchen, laundry, toilet/washing facilities, staff accommodation and offices.

Car parking is provided to the front of the home.

8.0 SUMMARY

During this Estates inspection a number of issues were identified for attention. Following this Estates Inspection of Mountvale Nursing Home on 15 August 2013, 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 eighteen 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 Mrs. Linda Kennedy, Registered Manager throughout the inspection process.

9.0 INSPECTION FINDINGS

9.1 Recommendations and requirements from previous inspection

- 9.1.1 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 20 July 2010
- 9.1.2 The smoke sealing to some of the fire doors, for example; the door to the laundry required attention. The fire doors should be inspected and any further remedial works required to ensure effective smoke sealing should be completed. Reference should be made to item 16 in the Quality Improvement Plan.
- 9.1.3 Multi way electrical adaptors should not be used in the home. Particular attention should be given to bedrooms 12, 18 and 31 in this regard. Consideration should be given to the installation of additional fixed power points as required. Reference should be made to item 17 in the Quality Improvement Plan.
- 9.1.4 The passenger lift was serviced on 7 May 2013. In addition a thorough examination in accordance with the Lifting Operations and Lifting Equipment Regulations was also completed on 2 May 2013. The reports in connection with these issues were also available in the home. It is recommended that a risk assessment should be completed in relation to the need for a safety edge for the lift door in accordance with current standards. Reference should be made to item 14 in the Quality Improvement Plan.
- 9.1.5 The carpet at the door threshold to the bathroom opposite bedroom 16 should be refitted. Reference should be made to item 4 in the Quality Improvement Plan.
- 9.1.6 The water system was cleaned and disinfected on 8 June 2013. The water temperatures were also being checked and recorded on a monthly basis. The record for these checks indicated that the unblended hot water temperatures at the outlets in the slice and the laundry were not achieving the minimum 50°C standard. Action should be taken to address this issue. Reference should be made to item 5 in the Quality Improvement Plan.
- 9.1.7 The above issues are restated where appropriate in the relevant sections of the attached quality improvement plan.

9.0 INSPECTION FINDINGS CONTINUED

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 A number of issues were identified for attention in relation to this standard as follows:
- 9.2.2 The floor coverings in a significant number of areas required attention. The PVC skirtings for the vinyl floor coverings in the sanitary facilities required to be either replaced or refixed in position. The floor coverings should be reviewed and a programme of deep cleaning and replacement should be implemented. Reference should be made to item 1 in the Quality Improvement Plan.
- 9.2.3 The woodwork in a significant number of areas required attention. Other areas of the premises such as the staff facilities also required redecoration. A programme redecoration should be implemented to ensure that all areas of the premises are maintained to the required standard. It is good to report that subsequent to this Estates inspection RQIA received confirmation from the Registered Manager that work had commenced in relation to these issues. A further progress update should be provided to RQIA in relation to these issues. Reference should be made to item 2 in the Quality Improvement Plan.
- 9.2.4 The vanity units in some of the bedroom, for example: bedroom 40 required attention. The bedroom furniture should be reviewed and a programme of replacement should be implemented as required. Subsequent to this Estates inspection RQIA received confirmation from the Registered Manager that this issue was included as part of a full infection control and environmental audit that was completed on 28 August 2013. A further progress update should be provided to RQIA in relation to this issue. Reference should be made to item 3 in the Quality Improvement Plan.
- 9.2.5 The above issues 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 A number of issues were identified for attention in relation to this standard as follows:
- 9.3.2 It is good to report that the fixed wiring installation was inspected and tested in March 2013. The report for this work indicated that the installation was in a satisfactory condition. This is to be commended. A risk assessment should be carried out in relation to the issues identified for attention in this report. Reference should be made to item 6 in the Quality Improvement Plan.
- 9.3.3 It is recommended that the risk assessment in relation to the prevention or control of legionella bacteria in the water systems should be carried out by a person with specialist expertise in this area. A record should also be kept for the quarterly disinfection of the showers. Reference should be made to item 15 in the Quality Improvement Plan.
- 9.3.4 It is good to report that the gas dryer in the laundry was inspected and tested by a Gas Safe Engineer on 23 May 2013. The cooker installation was also inspected and tested on 28 December 2013. The report for the cooker inspection identified some issues for attention. The action taken in relation to these issues should be confirmed to RQIA. Reference should be made to item 7 in the Quality Improvement Plan.
- 9.3.5 The vacuum system should be serviced. Reference should be made to item 8 in the Quality Improvement Plan.
- 9.3.6 The window openings in the smoking room and the quiet room were not controlled. The high level windows generally throughout the home were not controlled. All window openings should be controlled to a safe point of opening with a maximum clear opening of 100mm. Reference should be made to the specific previous correspondence from RQIA in relation to this issue. Reference should be made to item 9 in the Quality Improvement Plan.
- 9.3.7 The threshold strip at the door to bedroom 11 required attention. The wardrobe in bedroom 44 needed to be refixed to the wall. The electrical extension leads in bedroom 50 should be reviewed and rerouted as required. Consideration should be given to the installation of additional fixed power points in this room. These issues should be attended to. Reference should be made to item 10 in the Quality Improvement Plan.

9.0 INSPECTION FINDINGS CONTINUED

9.3 Standard 35 - Safe and healthy working practices continued

- 9.3.8 An infection control audit with a specific focus on the environment should be completed. The cleaning arrangements including the cleaning facilities and the cleaning equipment should be reviewed as part of this audit. Subsequent to this inspection confirmation from the Registered Manager was received by RQIA that a full infection control and environmental audit was carried out on the 27 August 2013 focusing on the condition of furniture, the carpets, the walls and general maintenance. This audit is initially to be carried out every two weeks to monitor the roll out programme in place and then every month thereafter to ensure that the standard of the Home is maintained. A further progress update should be provided to RQIA in relation to this issue. Reference should be made to item 11 in the Quality Improvement Plan.
- 9.3.9 The pipe casing in the bathroom opposite bedroom 16 was in a poor condition. The earth wire in the bathroom at bedroom 44 required to be reconnected. The lighting in this bathroom and the toilet opposite bedroom 6 was poor. The waste bin in the shower room opposite bedroom 29 should be replaced. The broken socket outlet in bedroom 24 should be replaced. These issues should be attended to. Reference should be made to item 12 in the Quality Improvement Plan.
- 9.3.10 The vegetation growth should be removed from the boiler room. The light in the generator room should be made good. Reference should be made to item 13 in the Quality Improvement Plan.
- 9.3.11 The above issues are detailed in the section of the attached Quality Improvement Plan entitled 'Standard 35 - Safe and healthy working practices'.

9.0 INSPECTION FINDINGS CONTINUED

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 Additional hold open devices linked to the fire detection and alarm system had recently been installed in the home and there were plans in place to complete the installation of a further hold open. This is to be commended.
- 9.4.2 A number of issues were identified for attention in relation to this standard as follows:
- 9.4.3 A fire risk assessment was carried out for the home on 12 March 2013. This is to be commended. The action plan in the report for this fire risk assessment should be checked to ensure that all of the issues have been addressed and signed off by the Registered Manager. Reference should be made to item 18 in the Quality Improvement Plan.
- 9.4.4 The arrangements for smoking in the home should be reviewed and revised as required. Particular attention should be given to the need for an easily accessible fire blanked in close proximity to the area used for smoking. Reference should be made to item 19 in the Quality Improvement Plan.
- 9.4.5 The door to the hairdressing room should not be propped open. A hold open device linked to the fire detection and alarm system should be installed at this door if it is required to be kept open. Reference should be made to item 20 in the Quality Improvement Plan.
- 9.4.6 The above issues are detailed in the section of the attached Quality Improvement Plan entitled 'Standard 36 – Fire Safety'.

10.0 QUALITY IMPROVEMENT PLAN

The details of the Quality Improvement plan appended to this report were discussed with Mrs. Linda Kennedy, 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**



Quality Improvement Plan Sign Off Sheet for Estates Inspectors

Name of Home	Mountvale Nursing Home, Dromore RQIA ID 1491
Date of Inspection	15 August 2013
Estates Inspector	Kieran Monaghan

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.	√	√	–	K. Monaghan	05 December 2013
C.	Clarification or follow up required on some items.	–	–	–	–	–

Estates Inspection – QIP sign off sheet

Informing and Improving Health and Social Care

NOTES:

The details of the quality improvement plan were discussed with Mrs. Linda Kennedy, 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	Linda Kennedy
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	T. Gage

Announced Estates Inspection to Mountvale Nursing Home, Dromore, 15 August 2013 (K. Monaghan)

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)
1.	Regulations 13(7) 27(2)(d)	The floor coverings should be reviewed and a programme of deep cleaning and replacement should be implemented. Reference should be made to paragraph 9.2.2 in the Report.	1 Month	All bathrooms have had PVC cladding and skirtings have been refixed. Carpets in main sitting rooms and corridors professionally shampooed. 10 bedroom carpets have been replaced by vinyl and this is on-going. Nilfisk Shampooer purchased
2.	Regulation 27(2)(d)	A further progress update in relation to the works included in the programme of redecoration should be confirmed to RQIA. Reference should be made to paragraph 9.2.3 in the Report.	1 Month	All doors have been repainted and perspex have been put on all doors. The staff facilities have been repainted.
3.	Regulation 18(2)(c)	A further progress update should be provided to RQIA in relation to programme of work for the replacement of the bedroom furniture. Reference should be made to paragraph 9.2.4 in the Report.	1 Month	Phased delivery of furniture due over a 3 month period. First delivery on 07/11/13 to replace all chipped beside lockers and cabinets.

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)	The carpet at the door threshold to the bathroom opposite bedroom 16 should be refitted. Reference should be made to paragraph 9.1.5 in the Report.	1 Month	Carpet at the threshold of the bathroom opposite room 16 has been refitted
5.	Regulations 13(7) 14(2)(a) 14(2)(c) 27(2)(q)	Action should be taken to ensure that the unblended hot water temperatures are maintained in accordance with the current standards for the prevention or control of legionella bacteria in water systems. Reference should be made to paragraph 9.1.6 in the Report.	Ongoing	The Hot water cylinder has been adjusted and temperatures are now recording over 50 degrees. These are recorded monthly.
Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
6.	Regulations 14(2)(a) 14(2)(c)	A risk assessment should be carried out in relation to the issues identified for attention in the report for the recent inspection and test of the fixed wiring installation. Reference should be made to paragraph 9.3.2 in the Report.	1 Month	The Contractor has been contacted and is in the process of providing a quote for the work required, in the interim he has stated that the fixed wiring is in a satisfactory condition.

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)
7.	Regulations 27(2)(c) 27(2)(q) 14(2)(a) 14(2)(c)	The action taken in relation to the issues identified for attention in the gas safety report for the cooker should be confirmed to RQIA. Reference should be made to paragraph 9.3.4 in the Report.	1 Month	The Contractor has been contacted and the work will be carried out on their next visit.
8.	Regulation 27(2)(q)	The vacuum system should be serviced. Reference should be made to paragraph 9.3.5 in the Report.	1 Month	The vacuum system was serviced on 22/08/13 and there is now a sticker on it stating this.
9.	Regulations 14(2)(a) 14(2)(c)	All window openings should be controlled to a safe point of opening with a maximum clear opening of 100mm. Reference should be made to the specific previous correspondence from RQIA in relation to this issue. Reference should be made to paragraph 9.3.6 in the Report.	1 Month	All window openings are now controlled with window restrictors.

Announced Estates Inspection to Mountvale Nursing Home, Dromore, 15 August 2013 (K. Monaghan)

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)
10.	Regulations 14(2)(a) 14(2)(c)	The threshold strip at the door to bedroom 11 should be made good. The wardrobe in bedroom 44 should be refixed to the wall. The electrical extension leads in bedroom 50 should be reviewed and rerouted as required. Consideration should be given to the installation of additional fixed power points in this room. Reference should be made to paragraph 9.3.7 in the Report.	1 Month	The threshold strip at the door to bedroom 11 has been repaired. The wardrobe in bedroom 44 has been refixed to the wall and the extra electrical extension lead in bedroom 50 has been removed.
11.	Regulations 13(7) 14(2)(a) 14(2)(c) 27(2)(d)	A progress update in relation to the works being completed to address the issues identified for attention by the infection control and environmental audits should be provided to RQIA. Reference should be made to paragraph 9.3.8 in the Report.	1 Month	Environmental audits are continued to be carried out by myself and the Housekeeper. Domestic Provision has been increased in the evenings.

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)
12.	Regulations 13(7) 14(2)(a) 14(2)(c) 27(2)(p)	The pipe casing in the bathroom opposite bedroom 16 should be made good. The earth wire in the bathroom at bedroom 44 should be reconnected. The lighting in this bathroom and in the toilet opposite bedroom 6 should be improved. The waste bin in the shower room opposite bedroom 29 should be replaced. The broken socket outlet in bedroom 24 should be replaced. Reference should be made to paragraph 9.3.9 in the Report.	1 Month	The pipe casing in the bathroom opposite bedroom 16 has been repaired. The earth wire in the bathroom at bedroom 44 has been removed. The lighting in this bathroom and in the toilet have been improved. The waste bin has been replaced as well as any other rusted waste bins. The socket outlet in room 24 has been replaced.
13.	Regulations 14(2)(a) 14(2)(c)	The vegetation growth should be removed from the boiler room. The light in the generator room should be made good. Reference should be made to paragraph 9.3.10 in the Report.	1 Month	The vegetation growth has been removed from the boiler room. The light in the generator room has been replaced.

Announced Estates Inspection to Mountvale Nursing Home, Dromore, 15 August 2013 (K. Monaghan)

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

Item	Regulation Reference	Recommendations	Timescale	Details Of Action Taken By Registered Person (S)
14.	Standard 35.1	It is recommended that a risk assessment should be completed in relation to the need for a safety edge for the lift door in accordance with current standards. Reference should be made to paragraph 9.1.4 in the Report.	1 Month	Kone due to visit in November and will fit a set of full height door detectors
15.	Standard 35.1	It is recommended that the risk assessment in relation to the prevention or control of legionella bacteria in the water systems should be carried out by a person with specialist expertise in this area. A record should also be kept for the quarterly disinfections of the showers. Reference should be made to paragraph 9.3.3 in the Report.	1 Month	Risk Assessment for the prevention of control of Legionella was carried out on 17/10/13 by BWT (NI) Ltd - awaiting report. A record is kept for the quarterly disinfections of the showers.

Announced Estates Inspection to Mountvale Nursing Home, Dromore, 15 August 2013 (K. Monaghan)

The following requirements 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)
16.	Regulations 27(4)(b) 27(2)(c) 27(4)(d)(i) 27(4)(d)(iv)	The fire doors should be inspected and any further remedial works required to ensure effective smoke sealing should be completed. Reference be made to paragraph 9.1.2 in the Report.	1 Month	Fire doors have been checked and remedial work has been carried out to ensure doors are compliant.
17.	Regulation 27(4)(b)	Multi way electrical adaptors should not be used in the home. Particular attention should be given to bedrooms 12, 18 and 31 in this regard Consideration should be given to the installation of additional fixed power points as required. Reference be made to paragraph 9.1.3 in the Report.	Ongoing	Multiway adaptors have been removed from the Home.

The following requirements 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)
18.	Regulations 27(2)(a) 27(4)(b)	The action plan in the report for the fire risk assessment that was completed on 12 March 2013 should be checked to ensure that all of the issues have been addressed and signed off by the Registered Manager. Reference be made to paragraph 9.4.3 in the Report.	1 Month	All issues have been addressed and signed off in the Fire Risk Assessment.
19.	Regulations 27(4)(b) 27(4)(d)(i)	The arrangements for smoking in the home should be reviewed and revised as required. Particular attention should be given to the need for an easily accessible fire blanked in close proximity to the area used for smoking. Reference be made to paragraph 9.4.4 in the Report.	1 Month	A fire blanket is now located just outside the Smoking room upstairs.
20.	Regulations 27(4)(b) 27(2)(c) 27(4)(d)(i)	The door to the hairdressing room should not be propped open. A hold open device linked to the fire detection and alarm system should be installed at this door if it is required to be kept open. Reference should be made to paragraph 9.4.5 in the Report.	Ongoing	Door is no longer kept open.