2005 No. 160

HEALTH AND PERSONAL SOCIAL SERVICES

The Nursing Homes Regulations (Northern Ireland) 2005

Made - - - - 23rd March 2005

Coming into operation 1st April 2005

The Department of Health, Social Services and Public Safety in exercise of the powers conferred on it by Articles 23(1), (2)(a) to (d) and (f) to (j), (3), (5), (7)(a) to (h), (j) and (l), 25(1), 30, 31(1), 32 and 48(2) of the Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003(1) and of all other powers enabling it in that behalf, having consulted such persons as appropriate, as required by Article 23(8) of that Order, hereby makes the following Regulations:

PART I

GENERAL

Citation, commencement and extent

1. These Regulations may be cited as the Nursing Homes Regulations (Northern Ireland) 2005 and shall come into operation on 1st April 2005.

Interpretation

2.—(1) In these Regulations –

“clinical trial” has the same meaning as in the Medicines for Human Use (Clinical Trials) Regulations 2004(2);

“ethics committee” has the same meaning as in the Medicines for Human Use (Clinical Trials) Regulations 2004;

“Fire Authority” means the Fire Authority for Northern Ireland within the meaning of the Fire Services (Northern Ireland) Order 1984(3);

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(1) S.I.2003/431 (N.I. 9)
(2) S.I. 2004/1031
(3) S.I. 1984/1821 (N.I. 11)
“general medical practitioner” means a medical practitioner providing primary medical services;
“health care professional” means a person who is registered as a member of any profession which is regulated by a body mentioned in Section 25(3) of the National Health Service Reform and Health Care Professions Act 2002(4) or who is a clinical psychologist or child psychotherapist;
“inspection report” means a report prepared in relation to the nursing home under Article 42(7) of the Order;
“nurse” means a person registered in the register maintained under Article 5 of the Nursing and Midwifery Order 2001(5) by virtue of qualification in nursing or midwifery as the case may be;
“the Order” means the Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003;
“organisation” means a body corporate or any unincorporated association other than a partnership;
“patient” means a person for whom nursing is provided in, or for the purposes of the nursing home;
“patient’s guide” means the guide compiled in accordance with regulation 4(1);
“patient’s plan” means the written plan prepared in accordance with regulation 16(1);
“registered manager” in relation to a nursing home, means a person who is registered under Part III of the Order as the manager of the nursing home;
“registered person” in relation to a nursing home, means any person who is the registered provider or registered manager in respect of the nursing home;
“registered provider” in relation to a nursing home, means a person who is registered under Part III of the Order as a person carrying on the nursing home;
“relative” in relation to any person, means –
(a) the person’s spouse;
(b) any parent, grandparent, child, grandchild, brother, sister, uncle, aunt, nephew or niece of his or her spouse;
(c) the spouse of any relative within sub-paragraph (b) of this definition,
and for the purpose of determining any such relationship a person’s step-child shall be treated as his child, and references to “spouse” in relation to any person include a former spouse and a person who is living with the person as husband or wife;
“representative” means in relation to a patient, a person other than the registered person or a person employed at the nursing home, who with the patient’s express or implied consent takes an interest in the patient’s health and welfare;
“responsible individual” shall be construed in accordance with regulation 7(2)(c)(i);
“social care worker” has the meaning as defined in Section 2 of the HPSS Act (Northern Ireland) 2001(6);
“staff” means persons employed by the registered person to work at the nursing home but does not include a volunteer or a person employed under a contract for services;
“statement of purpose” means the written statement compiled in accordance with regulation 3(1).

(4) 2002 c. 17
(5) S.I. 2002/253
(6) 2001 c. 3 (N.I.)
(2) In these Regulations, references to employing a person include employing a person whether or not for payment and whether under a contract of service or a contract for services and allowing a person to work as a volunteer.

**Statement of purpose**

3.—(1) The registered person shall compile in relation to the nursing home a written statement which shall consist of—

(a) a statement of the aims and objectives of the nursing home;
(b) a statement as to the facilities and services which are to be provided by the registered person for patients; and
(c) a statement as to the matters listed in Schedule 1.

(2) The registered person shall supply a copy of the statement of purpose to the Regulation and Improvement Authority and shall make a copy of it available for inspection by every patient and any representative of a patient.

(3) Nothing in regulation 18(1) or 27(1) shall require or authorise the registered person to contravene, or not to comply with—

(a) any other provision of these Regulations; or

(b) the conditions for the time being in force in relation to the registration of the registered person under Part III of the Order.

**Patient’s guide**

4.—(1) The registered person shall produce a written guide to the nursing home which shall include—

(a) a summary of the statement of purpose including the philosophy of care;
(b) the terms and conditions in respect of accommodation to be provided for patients, including as to the amount and method of payment of fees;
(c) a standard form of contract for the provision of services and facilities by the registered provider to patients;
(d) a summary of the complaints procedure established under regulation 24;
(e) the address and telephone number of the Regulation and Improvement Authority.

(2) The registered person shall also provide, on request, access to a copy of the most recent inspection report and information on how to access earlier inspection reports.

(3) The registered person shall supply a copy of the patient’s guide to the Regulation and Improvement Authority and each patient or their representative.

(4) Where a HSS Trust has made arrangements for the provision of accommodation and nursing to the patient at the nursing home, the registered person shall supply to the patient a copy of the agreement specifying the arrangements made.

**Information about fees**

5.—(1) The registered person shall provide to each patient, by not later than the day on which he becomes a patient, a statement specifying—

(a) the fees payable by or in respect of the patient for the provision to the patient of any of the following services—

(i) accommodation, including the provision of food; and
(ii) nursing;
and, except where a single fee is payable for those services, the services to which each fee relates;
(b) the method of payment of the fees and the person by whom the fees are payable.

(2) The registered person shall notify the patient at least 28 days in advance of—
(a) any increase in the fees referred to in paragraph (1)(a) and payable by or in respect of the patient;
(b) any variation in the matters referred to in paragraph (1)(b).

(3) Where a nursing contribution is paid in respect of nursing provided to the patient, the registered person shall provide to the patient a statement specifying—
(a) the date payment commenced and the amount of the nursing contribution; and
(b) the date on which the registered person is to deduct the amount of the nursing contribution from the fees referred to in paragraph (1)(a) or pay that amount to the patient.

(4) In this regulation “nursing contribution” means a payment by a HSS Trust to the registered person in respect of nursing to be provided to a patient, but does not include a payment where—
(a) the HSS Trust has made arrangements for the provision of accommodation to the patient; and
(b) the payment relates to any period for which under those arrangements accommodation is provided to the patient.

Review of statement of purpose and patient’s guide

6. The registered person shall—
(a) keep under review and, where appropriate, revise the statement of purpose and the patient’s guide; and
(b) notify the Regulation and Improvement Authority and patients of any such revision within 28 days.

PART II
REGISTERED PERSONS

Fitness of registered provider

7.—(1) A person shall not carry on a nursing home unless he is fit to do so.
(2) A person is not fit to carry on a nursing home unless the person—
(a) is an individual who carries on the nursing home—
(i) otherwise than in partnership with others, and he satisfies the requirements set out in paragraph (3);
(ii) in partnership with others, and he and each of his partners satisfies the requirements set out in paragraph (3);
(b) is a partnership, and each of the partners satisfies the requirements set out in paragraph (3);
(c) is an organisation; and
(i) the organisation has given notice to the Regulation and Improvement Authority of the name, address and position in the organisation of an individual who is a
director, manager, secretary or other officer of the organisation and is responsible
for supervising the management of the nursing home; and
(ii) that individual satisfies the requirements set out in paragraph (3).

(3) The requirements are that –
(a) he is of integrity and good character; and
(b) he is physically and mentally fit to carry on the nursing home; and
(c) full and satisfactory information is available in relation to him in respect of the matters
specified in paragraphs 1 to 7 of Schedule 2.

(4) A person shall not carry on a nursing home if –
(a) he has been adjudged bankrupt or sequestration of his estate has been awarded and (in
either case) he has not been discharged and the bankruptcy order has not been annulled
or rescinded; or
(b) he has made a composition or arrangement with his creditors and has not been discharged
in respect of it.

Appointment of manager

8.—(1) The registered provider shall appoint an individual to manage the nursing home where –
(a) there is no registered manager in respect of the nursing home;
(b) the registered provider –
(i) is an organisation or partnership;
(ii) is not a fit person to manage a nursing home; or
(iii) is not, or does not intend to be, in full-time day-to-day charge of the nursing home.

(2) Where the registered provider appoints a person to manage the nursing home he shall forthwith
give notice to the Regulation and Improvement Authority of –
(a) the name of the person so appointed; and
(b) the date on which the appointment is to take effect.

Fitness of registered manager

9.—(1) A person shall not manage a nursing home unless he is fit to do so.
(2) A person is not fit to manage a nursing home unless –
(a) he is of integrity and good character;
(b) having regard to the size of the nursing home, the statement of purpose, and the number
and needs of the patients –
(i) he is a nurse; and
(ii) he has the qualifications, skills and experience necessary for managing the nursing
home; and
(iii) he is physically and mentally fit to manage the nursing home; and
(c) full and satisfactory information is available in relation to him in respect of the matters
specified in paragraphs 1 to 7 of Schedule 2.
Registered person: general requirements

10.—(1) The registered provider and the registered manager shall, having regard to the size of the nursing home, the statement of purpose, and the number and needs of the patients, carry on or manage the nursing home (as the case may be) with sufficient care, competence and skill.

(2) If the registered provider is –
   (a) an individual, he shall undertake;
   (b) an organisation, it shall ensure that the responsible individual undertakes;
   (c) a partnership, it shall ensure that one of the partners undertakes;
from time to time such training as is appropriate to ensure that he has the experience and skills necessary for carrying on the nursing home.

(3) The registered manager shall undertake from time to time such training as is appropriate to ensure that he has the experience and skills necessary for managing the nursing home.

Registered person: notification of offences

11. Where the registered person or the responsible individual is convicted of any criminal offence, in Northern Ireland or elsewhere, he shall forthwith give notice in writing to the Regulation and Improvement Authority of –

   (a) the date and place of the conviction;
   (b) the offence of which he was convicted; and
   (c) the penalty imposed on him in respect of the offence.

PART III
CONDUCT OF THE NURSING HOME

Requirements to ensure quality of nursing and other service provision

12.—(1) The registered person shall provide treatment, and any other services to patients in accordance with the statement of purpose, and shall ensure that the treatment and other services provided to each patient –

   (a) meet his individual needs;
   (b) reflect current best practice; and
   (c) are (where necessary) provided by means of appropriate aids or equipment.

(2) The registered person shall ensure that all aids and equipment used in or for the purpose of the nursing home is –

   (a) suitable for the purposes for which it is to be used; and
   (b) properly maintained and in good working order.

(3) The registered person shall ensure that –

   (a) where reusable medical devices are used in a nursing home, the registered person shall ensure that appropriate procedures are implemented and adhered to in relation to cleaning, disinfection, inspection, packaging, sterilisation, transportation and storage of such devices;
   (b) the procedures implemented in accordance with sub-paragraph (a) shall be such as to ensure that reusable medical devices are handled safely and decontaminated effectively in accordance with the manufacturer’s guidance, prior to re-use.
(4) The registered person shall ensure that food and fluids –
   (a) are provided in adequate quantities and at appropriate intervals;
   (b) are properly prepared, wholesome and nutritious and meets their nutritional requirements;
   (c) are suitable for the needs of patients;
   (d) provide choice for the patients; and
   (e) that the menu is varied at suitable intervals.

Health and welfare of patients

13.—(1) The registered person shall ensure that the nursing home is conducted so as –
   (a) to promote and make proper provision for the nursing, health and welfare of patients;
   (b) to make proper provision for the nursing and where appropriate, treatment and supervision
      of patients.

(2) The registered person shall so far as practicable enable patients to make decisions with respect
    to the nursing they are to receive and their health and welfare.

(3) The registered person shall, for the purpose of providing nursing to patients, and making
    proper provision for their health and welfare, so far as practicable, ascertain and take into account
    their wishes and feelings.

(4) Subject to paragraph (5), the registered person shall make suitable arrangements for the
    ordering, storage, stock control, recording, handling, safe keeping, safe administration and disposal
    of medicines used in or for the purposes of the nursing home to ensure that –
    (a) any medicine which is kept in a nursing home is stored in a secure place; and
    (b) medicine which is prescribed is administered as prescribed to the patient for whom it is
        prescribed, and to no other patient; and
    (c) a written record is kept of the administration of any medicine to a patient.

(5) Paragraph (4) does not apply to medicine which –
    (a) is stored by the individual for whom it is provided in such a way that others are prevented
        from using it; and
    (b) may be safely self-administered by that individual.

(6) In this regulation, “prescribed” means –
    (a) ordered for a patient for provision to him under Part VI of the Health and Personal Social
        Services (Northern Ireland) Order 1972(7); or
    (b) prescribed for a patient under Section 58 of the Medicines Act 1968(8)

(7) The registered person shall make suitable arrangements to minimise the risk of infection and
    toxic conditions and the spread of infection between patients and staff.

(8) The registered person shall make suitable arrangements to ensure that the nursing home is
    conducted –
    (a) in a manner which respects the privacy and dignity of patients;
    (b) with due regard to the sex, religious persuasion, ethnic origin, and cultural and linguistic
        background and any disability of patients.

(9) The registered provider and registered manager (if any) shall, in relation to the conduct of the
    nursing home –

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(7) S.I. 1972/1265 (N.I. 14)
(8) 1968 c. 67; as amended by paragraph 7 of Part II of Schedule 2 to the Medicines (Specified Articles and Substances) Order 1976 (S.I. 1976/968)
(a) maintain good personal and professional relationships with each other and with patients and staff; and
(b) encourage and assist staff to maintain good personal and professional relationships with patients.

Further requirements as to health and welfare

14.—(1) The registered person shall make arrangements for patients–
(a) to be registered with a general practitioner of their choice; and
(b) to receive where necessary, treatment, advice and other services from any health care professional and/or social care worker.

(2) The registered person shall ensure as far as reasonably practicable that–
(a) all parts of the home to which patients have access are free from hazards to their safety;
(b) any activities in which patients participate are free from avoidable risks; and
(c) unnecessary risks to the health or safety of patients are identified and so far as possible eliminated; and
(d) shall make suitable arrangements for the training of persons employed in first aid.

(3) The registered person shall make suitable arrangements to provide a safe system for moving and handling patients.

(4) The registered person shall make arrangements, by training staff or by other measures, to prevent patients being harmed or suffering abuse or being placed at risk of harm or abuse.

(5) The registered person shall ensure that no patient is subject to restraint unless restraint of the kind employed is the only practicable means of securing the welfare of that or any other patient and there are exceptional circumstances.

(6) On any occasion on which a patient is subject to restraint, the registered person shall record the circumstances, including the nature of the restraint. These details should also be reported to the Regulation and Improvement Authority as soon as is practicable.

Assessment of patients

15.—(1) The registered person shall not provide accommodation to a patient at the nursing home unless–
(a) the needs of the patient have been assessed by a suitably qualified or suitably trained person;
(b) the registered person has obtained a copy of the assessment;
(c) there has been appropriate consultation regarding the assessment with the patient or a representative of the patient as appropriate;
(d) the registered person has confirmed in writing to the patient that having regard to the assessment the nursing home is suitable for the purpose of meeting the patient’s needs in respect of his health and welfare;
(e) the nursing home has been registered for the category of nursing appropriate to the patient’s needs.

(2) The registered person shall ensure that the assessment of the patient’s needs is–
(a) kept under review; and
(b) revised at any time when it is necessary to do so having regard to any change of circumstances and in any case not less than annually.
Patient’s plan

16.—(1) The registered person shall ensure that a written nursing plan is prepared by a nurse in consultation with the patient or patient’s representative as to how the patient’s needs in respect of his health and welfare are to be met.

(2) The registered person shall ensure that –
   
   (a) the patient’s plan is available to the patient;
   
   (b) the patient’s plan is kept under review;
   
   (c) where appropriate and, unless it is impracticable to carry out such consultation, after consultation with the patient or a representative of his, revise the patient’s plan; and
   
   (d) notify the patient of any such revision.

Review of quality of nursing and other service provision

17.—(1) The registered person shall introduce and ensure systems are maintained for reviewing at appropriate intervals the quality of nursing and other service provision in or for the purposes of the nursing home and that any such review is undertaken not less than annually.

(2) The registered person shall supply to the Regulation and Improvement Authority a report in respect of any review conducted by him for the purpose of paragraph (1) and make a copy of the report available to patients.

(3) The system referred to in paragraph (1) shall provide for consultation with patients and their representatives.

Facilities and services

18.—(1) Subject to regulation 3(3), the registered person shall provide facilities and services to patients in accordance with the statement of purpose required by regulation 3(1)(b) in respect of the nursing home.

(2) The registered person shall having regard to the size of the nursing home and the number and needs of patients –

   (a) provide, so far as is necessary for the purpose of managing the home, appropriate telephone and other communication facilities;
   
   (b) provide telephone facilities which are suitable for the needs of patients, and make arrangements to enable patients to use such facilities in private;
   
   (c) provide in rooms occupied by patients adequate furniture, bedding and other furnishings, including curtains and floor coverings, and equipment suitable to the needs of patients and screens where necessary;
   
   (d) permit patients, so far as it is practicable to do so, and subject to fire and safety requirements, to bring their own furniture and furnishings into the rooms they occupy;
   
   (e) arrange for the regular laundering of linen and clothing;
   
   (f) so far as it is reasonable and practicable to do so, provide adequate facilities for patients to wash, dry and iron their own clothes if they so wish and, for that purpose, to make arrangements for their clothes to be sorted and kept separately;
   
   (g) so far as it is reasonable and practicable to do so, provide sufficient and suitable kitchen equipment, crockery, cutlery and utensils, and adequate facilities for the preparation and storage of food;
   
   (h) so far as it is reasonable and practicable to do so, provide adequate facilities for patients to prepare their own food and ensure that such facilities are safe for use by patients;
(i) after consultation with the environmental health department of the district council for the district in which the nursing home is situated, make suitable arrangements for maintaining satisfactory standards of hygiene in the nursing home;

(j) keep the nursing home free from offensive odours;

(k) make suitable arrangements for the disposal of general and clinical waste;

(l) provide a place where the money and valuables of patients may be deposited for safe keeping, and make arrangements for patients to acknowledge in writing the return to them of any money or valuables so deposited;

(m) consult patients about their social interests, and make arrangements to enable them to engage in local, social and community activities and to visit, or maintain contact or communicate with, their families and friends;

(n) where activities are provided by or on behalf of the nursing home, including training, occupation and recreation, there are arrangements to ensure that –

   (i) activities are planned and provided with regard to the needs of the patients; and

   (ii) patients are consulted about the planned programme of activities.

(3) The registered person shall ensure that so far as practicable patients have the opportunity to attend religious services of their choice.

Records

19.—(1) The registered person shall –

   (a) maintain in respect of each patient a record which includes the information, documents and other records specified in Schedule 3 relating to the patient;

   (b) ensure that the record referred to in sub-paragraph (a) is kept securely in the nursing home.

(2) The registered person shall maintain in the nursing home the records specified in Schedule 4.

(3) The registered person shall ensure that the records referred to in paragraphs (1) and (2) –

   (a) are kept up to date; and

   (b) are at all times available for inspection in the home by any person authorised by the Regulation and Improvement Authority to enter and inspect the nursing home.

(4) The records referred to in paragraphs (1) and (2) shall be retained for not less than 6 years from the date of the last entry.

(5) The registered person shall ensure that information about a patient’s health and treatment is handled confidentially and is only disclosed to those persons who need to be aware of that information in order to treat the patient effectively or minimise any risk of the patient harming himself or another person, or for the purpose of the proper administration of the nursing home.

Staffing

20.—(1) The registered person shall, having regard to the size of the nursing home, the statement of purpose and the number and needs of patients –

   (a) ensure that at all times suitably qualified, competent and experienced persons are working at the nursing home in such numbers as are appropriate for the health and welfare of patients;

   (b) ensure that the employment of any persons on a temporary basis at the nursing home will not prevent patients from receiving such continuity of nursing as is reasonable to meet their needs;
(c) ensure that the persons employed by the registered person to work at the nursing home receive –
   (i) appraisal, mandatory training and other training appropriate to the work they are to perform; and
   (ii) are supported to maintain their registration with the appropriate regulatory or occupational body; and
   (iii) are enabled from time to time to obtain training and/or further qualifications appropriate to the work they perform;
   (iv) are provided with a job description outlining their responsibilities.

(2) The registered person shall ensure that persons working at the nursing home are appropriately supervised.

(3) The registered person shall ensure that at all times a nurse is working at the nursing home and that the registered manager carries out a competency and a capability assessment with any nurse who is given the responsibility of being in charge of the home for any period of time in his absence.

**Fitness of workers**

21.—(1) The registered person shall not employ a person to work at the nursing home unless –
   (a) the person is fit to work at the nursing home;
   (b) subject to paragraph (5), he has obtained in respect of that person the information and documents specified in paragraphs 1 to 7 of Schedule 2;
   (c) he is satisfied on reasonable grounds as to the authenticity of the references referred to in paragraph 3 of Schedule 2 in respect of that person.

(2) Paragraph 1 applies to a person who is employed by a person (“the employer”) other than the registered person.

(3) Paragraph 1 applies to a position in which a person may in the course of his duties have regular contact with patients at the nursing home.

(4) The registered person shall not allow a person to whom paragraph (2) applies to work at the nursing home in a position to which paragraph (3) applies, unless –
   (a) the person is fit to work at the nursing home;
   (b) the employer has obtained in respect of that person the information and documents specified in –
      (i) paragraphs 1 to 7 of Schedule 2; and has confirmed in writing to the registered person that he has done so; and
   (c) the employer is satisfied on reasonable grounds as to the authenticity of the references referred to in paragraph 3 of Schedule 2 in respect of that person, and has confirmed in writing to the registered person that he is so satisfied.

(5) For the purposes of paragraphs (1) and (4), a person is not fit to work at a nursing home unless –
   (a) he is of integrity and good character;
   (b) he has qualifications or training suitable to the work that he is to perform, and the skills and experience necessary for such work;
   (c) he is physically and mentally fit for the purposes of the work he is to perform at the nursing home;
   (d) full and satisfactory information is available in relation to him in respect of the following matters –
(i) each of the matters specified in paragraphs 1 to 7 of Schedule 2;

(6) The registered person shall ensure that all health care professionals are covered by appropriate professional indemnity.

Restrictions on acting for patients

22.—(1) Subject to paragraph (2), the registered person shall not pay money belonging to any patient into a bank account unless –

(a) the account is in the name of the patient, to which the money belongs; and

(b) the account is not used by the registered person in connection with the carrying on or management of the nursing home.

(2) Paragraph (1) does not apply to money which is paid to the registered person in respect of charges payable by a patient for accommodation or other services provided by the registered person at the nursing home.

(3) The registered person shall ensure a record is kept of persons working at the nursing home acting as the appointee or agent of a patient.

Staff views as to conduct of the nursing home

23.—(1) This regulation applies to any matter relating to the conduct of the nursing home so far as it may affect the health or welfare of patients.

(2) The registered person shall make arrangements to enable staff to inform the registered person, and the Regulation and Improvement Authority, and the HSS Trust in the area of which the nursing home is situated, in confidence of their views about any matter to which this regulation applies.

Complaints

24.—(1) The registered person shall establish a procedure ("the complaints procedure") for receiving, managing and responding to complaints made to the registered person by a patient or person acting on the patient’s behalf.

(2) The complaints procedure shall be appropriate to the needs of patients.

(3) The registered person shall ensure that any complaint made under the complaints procedure is fully investigated.

(4) The registered person shall, within 28 days after the date on which the complaint is made, or such shorter period as may be reasonable in the circumstances, inform the person who made the complaint of the investigative process, outcome and action (if any) that is to be taken.

(5) The registered person shall supply a written copy of the complaints procedure to every patient and to any person acting on behalf of a patient.

(6) Where a written copy of the complaints procedure is to be supplied in accordance with paragraph (5) to a person who is blind or whose vision is impaired, the registered person shall so far as is practicable to do so supply, in addition to the written copy, a copy of the complaints procedure in a form which is suitable for that person.

(7) The copy of the complaints procedure to be supplied in accordance with paragraph (5) shall include –

(a) the name, address and telephone number of the Regulation and Improvement Authority; and
(b) the procedure (if any) that has been notified by the Regulation and Improvement Authority to the registered person for the making of complaints to the Regulation and Improvement Authority relating to the nursing home.

(8) The registered person shall supply to the Regulation and Improvement Authority at its request a statement containing a summary of the complaints made during the preceding twelve months and the action that was taken in response.

Guidance for nurses and health care professionals

25. The registered person shall ensure that –

(a) the Nursing and Midwifery Council (NMC) Code of Professional Conduct, Standards for Performance, Conduct and Ethics, and any other code of ethics or professional practice prepared by the NMC or a body which is responsible for regulation of members of a healthcare profession is made available in the nursing home to nurses and healthcare professionals;

(b) staff are supported to meet and maintain the standards and requirements of their relevant codes of practice; and

(c) appropriate action is taken when staff do not meet the expected standards of conduct in line with the relevant codes of practice.

Clinical trials and research

26. The registered person shall ensure that –

(a) before any research involving patients or information about patients is undertaken in or for the purposes of the nursing home, a research proposal is prepared and approval is obtained from the appropriate Ethics Committee;

(b) any clinical trial to be conducted in the nursing home has been authorised in accordance with the Medicines for Human Use (Clinical Trials) Regulations 2004(9).

PART IV

PREMISES

Fitness of premises

27.—(1) Subject to regulation 3(3), the registered person shall not use the premises for the purposes of a nursing home unless the premises are suitable for the purpose of achieving the aims and objectives set out in the statement of purpose.

(2) The registered person shall, having regard to the number and needs of the patients, ensure that –

(a) the physical design and layout of the premises to be used as the nursing home meets the needs of the patients;

(b) the premises to be used as the nursing home are of sound construction and kept in a good state of repair externally and internally;

(c) equipment provided at the nursing home for use by patients or persons who work at the home is in good working order, properly maintained in accordance with the manufacturer’s guidance, and suitable for the purpose for which it is to be used;

(9) S.I. 2004/1031
(d) all parts of the nursing home are kept clean and reasonably decorated;
(e) adequate private and communal accommodation is provided for patients;
(f) the size and layout of rooms occupied or used by patients are suitable for their needs;
(g) there is adequate seating, recreational and dining space provided separately from the patient's private accommodation;
(h) the communal space provided for patients is suitable for the provision of social, cultural and religious activities appropriate to the circumstances of patients;
(i) suitable facilities are provided for patients to receive visitors whether in communal areas or in private as the patient chooses;
(j) there are provided at appropriate places in the premises sufficient numbers of lavatories, wash-basins, baths and showers fitted with a hot and cold water supply;
(k) any necessary sluicing facilities are provided;
(l) there is suitable sluicing facilities for the purposes of the nursing home;
(m) suitable storage facilities are provided for the use of patients;
(n) suitable adaptations are made, and such support, equipment and facilities, including passenger lifts, as may be required are provided to meet the needs of patients;
(o) secure and safe outdoor space with seating, accessible to all residents is provided and appropriately maintained;
(p) ventilation, heating, cooling and lighting suitable for patients is provided in all parts of the nursing home which are used by patients;
(q) the engineering services are maintained in good working order;
(r) any vehicle used by the home for transporting patients is suitable for that purpose and maintained in good working order;
(s) provision is made for the home to operate in the event of the breakdown of essential utility services; and
(t) a risk assessment to manage health and safety is carried out and updated when necessary.

(3) The registered person shall, having regard for the number of staff employed and the duties they undertake, provide –

(a) suitable facilities and accommodation, including –
   (i) facilities for the purpose of changing;
   (ii) storage facilities.

(4) The registered person shall –

(a) have in place a current risk written assessment and fire management plan which is revised and actioned when necessary or whenever the fire risk has changed;
(b) take adequate precautions against the risk of fire, including the provision of suitable fire equipment;
(c) provide adequate means of escape;
(d) make adequate arrangements –
   (i) for detecting, containing and extinguishing fires;
   (ii) for giving warnings of fires;
   (iii) for the evacuation, in the event of fire, of all persons in the nursing home and safe placement of patients;
   (iv) for the maintenance of all fire equipment; and
(v) for reviewing fire precautions, and testing fire equipment, at suitable intervals;
(e) make arrangements for persons working at the nursing home to receive suitable training from a competent person in fire prevention; and
(f) to ensure, by means of fire drills and practices at suitable intervals, that the persons working at the nursing home and, so far as practicable, patients, are aware of the procedure to be followed in case of fire, including the procedure for saving life.

(5) The registered person shall undertake appropriate consultation with the environmental health department of the district council for the district in which the nursing home is situated.

PART V
MANAGEMENT

Financial position

28.—(1) The registered provider shall carry on the nursing home in such a manner as is likely to ensure that the home will be financially viable for the purpose of achieving the aims and objectives set out in the statement of purpose.

(2) The registered person shall, if the Regulation and Improvement Authority so requests, provide such information and documents to the Regulation and Improvement Authority as it may require for the purpose of considering the financial viability of the nursing home, including –
(a) the annual accounts of the nursing home certified by an accountant;
(b) a reference from a bank expressing an opinion as to the registered provider’s financial standing;
(c) information as to the financing and financial resources of the nursing home;
(d) where the registered provider is a company, information as to any of its associated companies;
(e) a certificate of insurance for the registered provider in respect of liability which may be incurred by him in relation to the nursing home in respect of death, injury, public liability, damage or other loss.

(3) The registered person shall –
(a) ensure that adequate accounts are maintained in respect of the nursing home and kept up to date;
(b) ensure that the accounts give details of the running costs of the nursing home, including rent, payments under a mortgage and expenditure on food, heating and salaries and wages of staff; and
(c) supply a copy of the accounts to the Regulation and Improvement Authority at its request.

(4) In this regulation a company is an associated company of another if one of them has control of the other or both are under the control of the same person.

Visits by registered provider

29.—(1) Where the registered provider is an individual, but not in day-to-day charge of the nursing home, he shall visit the home in accordance with this regulation.

(2) Where the registered provider is an organisation or partnership, the nursing home shall be visited in accordance with this regulation by –
(a) the responsible individual or one of the partners, as the case may be;
(b) another of the directors or other persons responsible for the management of the organisation or partnership; or
(c) an employee of the organisation or the partnership who is not directly concerned with the conduct of the nursing home.

(3) Visits under paragraph (1) or (2) shall take place at least once a month or as agreed with the Regulation and Improvement Authority and shall be unannounced.

(4) The person carrying out the visit shall—
   (a) interview, with their consent and in private, such of the patients and their representatives and persons working at the nursing home as appears necessary in order to form an opinion of the standard of nursing provided in the home;
   (b) inspect the premises of the nursing home, its record of events and records of any complaints; and
   (c) prepare a written report on the conduct of the nursing home.

(5) The registered provider shall maintain a copy of the report required to be made under paragraph (4)(c) in the home and make it available on request to—
   (a) the Regulation and Improvement Authority;
   (b) the registered manager;
   (c) the patient or their representative;
   (d) an officer of the Trust in the area of which the nursing home is situated.

(6) In the case of a visit under paragraph (2)—
   (a) where the registered provider is an organisation, to each of the directors or other persons responsible for the management of the organisation; and
   (b) where the registered provider is a partnership, to each of the partners.

PART VI
MISCELLANEOUS

Notification of death, illness and other events

30.—(1) The registered person shall give notice to the Regulation and Improvement Authority without delay of the occurrence of—
   (a) the death of any patient, in the nursing home, including the circumstances of his death;
   (b) the outbreak in the nursing home of any infectious disease which in the opinion of any medical practitioner attending persons in the home is sufficiently serious to be so notified;
   (c) any serious injury to a patient in the nursing home;
   (d) any event in the nursing home which adversely affects the wellbeing or safety of any patient;
   (e) any theft or burglary in the nursing home;
   (f) any accident in the nursing home;
   (g) any allegation of misconduct by the registered person or any person who works at the nursing home.
(2) Any notification made in accordance with this regulation which is given orally shall be confirmed in writing within 3 days of the oral report.

Notice of absence

31.—(1) Where –
(a) the registered provider, if he is an individual; or
(b) the registered manager;
proposes to be absent from the nursing home for a continuous period of 28 days or more, the registered person shall give notice in writing to the Regulation and Improvement Authority of the proposed absence.
(2) Except in the case of an emergency, the notice referred to in paragraph (1) above shall be given no later than 28 days before the proposed absence commences or within such shorter period as may be agreed with the Regulation and Improvement Authority and the notice shall specify –
(a) the length or expected length of the absence;
(b) the reason for the absence;
(c) the arrangements which have been made for the running of the nursing home during that absence;
(d) the name, address and qualifications of the person who will be responsible for the nursing home during that absence; and
(e) in the case of the absence of the registered manager, the arrangements that have been, or are proposed to be, made for appointing another person to manage the nursing home during that absence, including the proposed date by which the appointment is to be made.
(3) Where the absence arises as a result of an emergency, the registered person shall give notice of the absence within one week of its occurrence specifying the matters mentioned in sub-paragraphs (a) to (e) of paragraph (2).
(4) Where –
(a) the registered provider, if he is an individual; or
(b) the registered manager;
has been absent from the nursing home for a continuous period of 28 days or more, and the Regulation and Improvement Authority has not been given notice of the absence, the registered person shall without delay give notice in writing to the Regulation and Improvement Authority of the absence, specifying the matters mentioned in sub-paragraphs (a) to (e) of paragraph (2).
(5) The registered person shall notify the Regulation and Improvement Authority of the return to duty of the registered provider or (as the case may be) the registered manager not later than 7 days after the date of his return.

Notice of changes

32. The registered person shall give notice in writing to the Regulation and Improvement Authority as soon as it is practicable to do so, if any of the following events takes place or is proposed to take place –
(a) a person other than the registered person carries on or manages the nursing home;
(b) a person ceases to carry on or manage the nursing home;
(c) where the registered person is an individual, he changes his name;
(d) where the registered provider is a partnership, there is any change in the membership of the partnership;
(e) where the registered provider is an organisation –
   (i) the name or address of the organisation is changed;
   (ii) there is any change of director, manager, secretary or other similar officer of the
        organisation;
   (iii) there is to be any change of responsible individual;
(f) where the registered provider is an individual, a trustee in bankruptcy is appointed;
(g) where the registered provider is a company or partnership, a receiver, manager, liquidator
    or provisional liquidator is appointed; or
(h) the premises of the nursing home are significantly altered or extended, or additional
    premises are acquired.

Notice of termination of accommodation

33.—(1) Subject to paragraph (2), the registered person shall not terminate the arrangements for
the accommodation of a patient unless he has given reasonable notice of his intention to do so to –
   (a) the patient;
   (b) the person who appears to be the patient’s next of kin; and
   (c) where an HSS Trust has made arrangements for the provision of accommodation, and
       nursing to the patient at the home, that Trust.

(2) If it is impracticable for the registered person to comply with the requirement in paragraph (1)

   (a) he shall do so as soon as it is practicable to do so; and
   (b) he shall provide to the Regulation and Improvement Authority a statement as to the
       circumstances which made it impracticable for him to comply with the requirement.

Appointment of liquidators etc.

34.—(1) Any person to whom paragraph (2) applies must –
   (a) forthwith notify the Regulation and Improvement Authority of his appointment, indicating
       the reasons for it;
   (b) appoint a manager to take full-time day-to-day charge of the nursing home in any case
       where there is no registered manager; and
   (c) within 28 days of his appointment notify the Regulation and Improvement Authority of
       his intentions regarding the future operation of the nursing home.

(2) This paragraph applies to any person appointed as –
   (a) the receiver or manager of the property of a company or partnership which is a registered
       provider in respect of a nursing home;
   (b) a liquidator or provisional liquidator of a company which is a registered provider of a
       nursing home; or
   (c) the trustee in bankruptcy of a registered provider of a nursing home.

Death of registered person

35.—(1) If more than one person is registered in respect of a nursing home, and a registered person
dies, the surviving registered person shall without delay notify the Regulation and Improvement
Authority of the death in writing.
(2) If only one person is registered in respect of a nursing home, and he dies, his personal representatives shall notify the Regulation and Improvement Authority in writing –

(a) without delay of the death; and

(b) within 28 days of their intentions regarding the future running of the nursing home.

(3) The personal representatives of the deceased registered provider may carry on the nursing home without being registered in respect of it –

(a) for a period not exceeding 28 days; and

(b) for any further period as may be determined in accordance with paragraph (4).

(4) The Regulation and Improvement Authority may extend the period specified in paragraph (3) (a) by such further period, not exceeding one year, as the Regulation and Improvement Authority shall determine, and shall notify any such determination to the personal representatives in writing.

(5) The personal representatives shall appoint a person to take full-time day-to-day charge of the home during any period in which, in accordance with paragraph (3), they carry on the nursing home without being registered in respect of it.

Offences

36. —(1) A contravention of any of the provisions of regulations 3, 4, 5, 11, 12, 13(1) to (4) and (7) to (9), 14, 15 to 17, 18(1), (2)(a) to (i) and (k) to (n) and (3), 19 to 24, and 27 to 33, shall be an offence.

(2) The Regulation and Improvement Authority shall not bring proceedings against a person in respect of any contravention of those regulations unless –

(a) subject to paragraph (4), he is a registered person;

(b) notice has been given to him in accordance with paragraph (3);

(c) the period specified in the notice, has expired; and

(d) the person contravenes any of the provisions of the regulations mentioned in the notice.

(3) Where the Regulation and Improvement Authority considers that the registered person has contravened any of the provisions of the regulations mentioned in paragraph (1), it may serve a notice on the registered person specifying –

(a) in what respect in its opinion the registered person has contravened the requirements of any of the regulations;

(b) what action, in the opinion of the Regulation and Improvement Authority, the registered person should take so as to comply with any of those regulations; and

(c) the period, not exceeding three months, within which the registered person should take action.

(4) The Regulation and Improvement Authority may bring proceedings against a person who was once, but no longer is, a registered person, in respect of a failure to comply with regulation 19 and for this purpose, references in paragraphs (2) and (3) to a registered person shall be taken to include such a person.

Compliance with regulations

37. Where there is more than one registered person in respect of a nursing home, anything which is required under these regulations to be done by the registered person shall, if done by one of the registered persons, not be required to be done by any of the other registered persons.
Revocation

38. The Nursing Homes Regulations (Northern Ireland) 1993(10) and the Nursing Homes (Amendment) Regulations (Northern Ireland) 1998(11), are hereby revoked.


L.S.

N. McCann
Senior Officer of the
Department of Health, Social Services and
Public Safety

(10) S.R. 1993 No. 92
(11) S.R. 1998 No. 140
SCHEDULE 1

INFORMATION TO BE INCLUDED IN THE STATEMENT OF PURPOSE

1. The name and address of the registered provider and of any registered manager.
2. The relevant qualifications and experience of the registered provider and any registered manager.
3. The number, relevant qualifications and experience of the staff working at the nursing home.
4. The philosophy of care.
5. The status and constitution of the nursing home.
6. The organisational structure of the nursing home.
7. The number of patients to be accommodated or provided with services.
8. The range of needs, (categories of nursing) that the nursing home is intended to meet and the number in each category.
9. Any criteria used for admission to the nursing home, including the nursing home’s policy and procedures (if any) for emergency admissions.
10. The arrangements for patients to engage in social activities, hobbies and leisure interests.
11. The arrangements made for consultation with patients about the operation of the nursing home.
12. The fire precautions and associated emergency procedures in the nursing home.
13. The arrangements made, so far as it is practicable, that patients have the opportunity to attend religious services of their choice.
14. The arrangements made for contact between patients and their relatives, friends and representatives and the local community, where practicable.
15. The arrangements for dealing with complaints.
16. The arrangements made for dealing with reviews of the patient’s plan referred to in regulation 16(1).
17. The number and size of rooms in the nursing home.
18. Details of any specific therapeutic techniques used in the nursing home and arrangements made for their supervision.
19. The arrangements made for respecting the privacy and dignity of patients.

SCHEDULE 2

INFORMATION AND DOCUMENTS TO BE OBTAINED IN RESPECT OF PERSONS, CARRYING ON, MANAGING OR WORKING AT A NURSING HOME

1. Proof of the person’s identity, including a recent photograph.
2. Either –
(a) where a certificate is required for a purpose relating to registration under Part III of the Order, or the position falls within section 115(3) or (4) of that Act, an enhanced criminal record certificate issued under section 115 of the Police Act 1997(12); or

(b) in any other case, a criminal certificate issued under section 113 of that Act, including, where applicable, the matters specified in sections 113(3EA) and 115 (6EA)(13) of that Act and the following provisions once they are in force, namely section 113(3EC)(a) and (b) and section 115 (6EB)(a) and (b)(14) of that Act.

3. Two written references relating to the person, including a reference from the person’s present or most recent employer, (if any).

4. Where a person has previously worked in a position whose duties involved work with children or vulnerable adults, so far as it is reasonably practicable, verification of the reason why the employment or position ended.

5. Details and documentary evidence of any relevant qualifications or accredited training of the person and if applicable, registration with an appropriate professional regulatory body.

6. A full employment history, together with a satisfactory written explanation of any gaps in employment.

7. Evidence that the person is physically and mentally fit for the purposes of the work which he is to perform with regard to or at the nursing home or, where it is impracticable for the person to obtain such evidence, a declaration signed by the person that he is so fit.

SCHEDULE 3

RECORDS TO BE KEPT IN A NURSING HOME IN RESPECT OF EACH PATIENT

1. The following documents in respect of each patient –
   (a) the assessment of needs referred to in regulation 15(1)(a);
   (b) the patient’s plan referred to in regulation 16(1).

2. A recent photograph of the patient.

3. A record of the following matters in respect of each patient –
   (a) the name, address, date of birth and marital status of each patient;
   (b) the name, address and telephone number of the patient’s next of kin or of any person authorised to act on his behalf;
   (c) the name, address and telephone number of the patient’s general practitioner and of any officer of a HSS Trust whose duty it is to supervise the welfare of the patient;
   (d) the date on which the patient was admitted to the nursing home;
   (e) the date on which the patient was discharged from the nursing home;
   (f) if the patient is transferred to another nursing home or to a hospital, the name of the nursing home or hospital and the date on which the patient is transferred;
   (g) if the patient died at the nursing home, the date and time of death;
   (h) the name and address of any HSS Trust, organisation or other body, which arranged the patient’s admission to the nursing home;

(12) 1997 c. 50
(13) Section 113(3EA) and 115(6EA) are inserted by S.I. 2003/417 (N.I. 4) – Article 17
(14) Section 113(3EC) and 115(6EB) are inserted by S.I. 2003/417 (N.I. 4) – Article 47
(i) a record of all medicines kept in the nursing home for the patient, and the date on which they were administered to the patient;

(j) a record of any accident affecting the patient in the nursing home and of any other incident in the home which is detrimental to the health or welfare of the patient, the record shall include the nature, date and time of the accident or incident, whether medical treatment was required and the name of the nurses who were respectively in charge of the nursing home and supervising the patient;

(k) a contemporaneous note of all nursing provided to the patient, including a record of his condition and any treatment or surgical intervention;

(l) details of any specialist communications needs of the patient and methods of communication that may be appropriate to the patient;

(m) details of any healthcare plan relating to the patient in respect of medication, specialist health care provision or nutrition;

(n) the wishes of the patient regarding any specific arrangements at the time of death;

(o) a record of falls and of treatment provided to the patient;

(p) a record of incidence of pressure ulcers and of treatment provided to the patient;

(q) a record of any restraint used in relation to the patient;

(r) a record of any limitations agreed with the patient as to the patient’s freedom of choice, liberty of movement and power to make decisions.

4. A copy of correspondence relating to each patient.

SCHEDULE 4

OTHER RECORDS TO BE KEPT IN A NURSING HOME

1. A copy of the statement of purpose.

2. A copy of the patient’s guide.

3. A record of all accounts relating to the home, including a record of patient’s fees and financial arrangements that are handled by the nursing home and a record of persons working at the home acting as the appointee or agent of a patient.

4. A copy of all inspection reports.

5. A copy of any report made under regulation 29(4)(c) and a copy of any written record or report made under regulation 30.

6. A record of all persons employed at the nursing home, including in respect of each person so employed, including –

   (a) his full name, address, date of birth, qualifications, experience and if applicable, confirmation of his registration status with an appropriate professional regulatory body;

   (b) a copy of his birth certificate and passport (if any);

   (c) a copy of each reference obtained in respect of him;

   (d) the dates on which he commences and ceases to be so employed;

   (e) the position he holds at the nursing home, the work that he performs and the number of hours for which he is employed each week;
(f) correspondence, reports, records of disciplinary action and any other records in relation to his employment including the recruitment process under which he was appointed;

(g) the training and development activities completed by him.

7. A copy of the duty roster of persons working at the nursing home, and a record of whether the roster was actually worked.

8. A record of the nursing home’s charges to patients, including any extra amounts payable for additional services not covered by those charges, and the amounts paid by or in respect of each patient.

9. A record of all money or other valuables deposited by a patient for safekeeping or received on the patient’s behalf, which –

(a) shall state the date on which the money or valuables were deposited or received, the date on which any money or valuables were returned to a patient or used, at the request of the patient, on his behalf and, where applicable, the purpose for which the money or valuables were used; and

(b) shall include the written acknowledgement of the return of the money or valuables.

10. A record of furniture and personal possessions brought by a patient into the room occupied by him.

11. A record of all complaints made by patients or representatives or relatives of patients or by persons working at the nursing home about the operation of the nursing home, and the action taken by the registered person in respect of any such complaint.

12. A record of any of the following events that occur in the nursing home –

(a) any accident;

(b) any incident which is detrimental to the health or welfare of a patient, including the outbreak of infectious disease in the home;

(c) any injury or serious illness;

(d) any fire;

(e) except where a record to which paragraph 14 refers is to be made, any occasion on which the fire alarm equipment is operated;

(f) any theft or burglary.

13. Records of the food provided for patients in sufficient detail to enable any person inspecting the record to determine whether the diet is satisfactory, in relation to nutrition and otherwise, and of any special diets prepared for individual patients.

14. A record of every fire practice, drill or test of fire equipment (including fire alarm equipment) conducted in the nursing home and of any action taken to remedy defects in the fire equipment.

15. A statement of the procedure to be followed in the event of a fire, or where a fire alarm is activated.

16. A statement of the procedure to be followed in the event of accidents or in the event of a patient becoming missing.

17. A record of charges made to patients for transport and the amounts paid by or in respect of each patient.

18. Where patients collectively own the vehicles –

(a) a record is kept with the amounts paid by or in respect of each patient running the vehicle;

(b) a record is kept of journeys made and names of patients being transported.
19. A record of the programme of events and activities that includes the name of the person leading the activity and the names of those who participated.

20. A record of all staff meetings held and the names of all those attending.


22. A record of all visitors to the nursing home, including the names of all visitors.

EXPLANATORY NOTE

(This note is not part of the Regulations.)

These Regulations are made under the Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003. Part II of the Order establishes the Northern Ireland Health and Personal Social Services Regulation and Improvement Authority (“the Regulation and Improvement Authority”) and Part III provides for the registration and inspection of establishments and agencies, including nursing homes, by the Regulation and Improvement Authority. It also provides powers for regulations governing the conduct of establishments and agencies.

These new arrangements replace the regulatory system provided for in relation to nursing homes by the Registered Homes (Northern Ireland) Order 1992.

Under regulations 3, 4 and 5, each home must have a statement of purpose consisting of the matters set out in Schedule 1, and supply a guide of the nursing home to each patient together with a statement giving information about fees payable.

Regulations 7 to 10 make provision about the fitness of the persons carrying on and managing the nursing home, and require satisfactory information to be available in relation to certain specified matters. Where an organisation carries on the nursing home, it must nominate a responsible individual in respect of whom this information must be available (regulation 7). Regulation 8 prescribes the circumstances where a manager must be appointed for the nursing home, and regulation 10 imposes general requirements in relation to the proper conduct of the nursing home, and the need for appropriate training. Regulation 17 requires the registered person to establish a system for reviewing and improving the quality of nursing provided by the nursing home.

Part III makes provision about the conduct of nursing homes, in particular as to health and welfare of patients, and as to the facilities and services that are to be provided. Provision is also made about record keeping, the staffing of nursing homes, the fitness of workers, and about complaints.

Part IV makes provision about the suitability of premises and fire precautions to be taken. Part V deals with the management of nursing homes. Regulation 28 imposes requirements relating to the nursing home’s financial position. Regulation 29 requires the registered person to visit the nursing home as prescribed.

Part VI deals with miscellaneous matters including the giving of notices to the Regulation and Improvement Authority. Regulation 36 provides for offences. A breach of the regulations specified in regulation 36 may found an offence on the part of the registered person. However, no prosecution may be brought unless the Regulation and Improvement Authority has first given the registered person a notice which sets out in what respect it is alleged he is not complying with a regulation, and what action the Regulation and Improvement Authority considers it is necessary for him to take in order to comply. The notice must specify a time period for compliance, not exceeding three months.
**Status:** This is the original version (as it was originally made). This item of legislation is currently only available in its original format.