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Announced Estates Inspection of Ballyowen House

13 October 2015

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

Inspector: Gavin Doherty Inspection ID: IN021575

1. Summary of Inspection

An announced estates inspection took place on 13 October 2015 from 10.30 to 12.30. Overall on the day of the inspection the premises supported the delivery of safe, effective and compassionate care. Areas for improvement were identified and are set out in the Quality Improvement Plan (QIP) appended to this report. This inspection was underpinned by the Residential Care Homes Minimum Standards 2011.

1.1 Actions/Enforcement Taken Following the Last Inspection

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

1.2 Actions/Enforcement Resulting from this Inspection

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

1.3 Inspection Outcome

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

The details of the QIP within this report were discussed with Mr Joe Quinn as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Organisation/Registered Person:	Registered Manager:
Belfast HSC Trust	Ms Fionnuala Breslin
Person in Charge of the Home at the Time of Inspection: Mr Joe Quinn	Date Manager Registered: 20 February 2013
Categories of Care:	Number of Registered Places:
RC-DE	31
Number of Residents Accommodated on Day of Inspection: 15	Weekly Tariff at Time of Inspection: Trust Rates

3. Inspection Focus

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

Standard 27: Premises and Grounds

Standard 28: Safe and Healthy working Practices

Standard 29: Fire safety

4. Methods/Process

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

Prior to inspection the following records were analysed:

- Previous estate's inspection report
- Statutory notifications received over the past 12 months.

During the inspection the inspector did not meet with any patients, visiting professionals or patient's representatives.

The following records were examined during the inspection:

- Fire risk assessment
- Fire safety service records and in-house log books
- Electrical certificates & associated records.
- LOLER reports
- Legionella risk assessment and controls records.
- Gas Safe certification

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the home was an unannounced care inspection dated 8 September 2015. The completed QIP was returned and approved by the specialist inspector on 7 October 2015.

There were no areas for follow-up as a result of this inspection.

5.2 Review of Requirements and Recommendations from the last Estates Inspection

Previous Inspection Statutory Requirements		Validation of Compliance	
Requirement 1 Ref: Regulation	the current fire risk assessment are implemented and signed-off as complete without further delay.		
27 (4) (a)	Action taken as confirmed during the inspection: Inspector confirmed during the course of the inspection.	Met	
Requirement 2 Ref: Regulation	Ensure that procedure for the monthly function check of the emergency lighting installation is implemented within the home without any further delay.		
27 (4) (e)	Action taken as confirmed during the inspection: Inspector confirmed during the course of the inspection.	Met	

5.3 Standard 27: Premises and Grounds

Is Care Safe? (Quality of Life)

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

Is Care Effective? (Quality of Management)

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

Is Care Compassionate? (Quality of Care)

The areas of the premises reviewed during this estates inspection were well presented, clean and free from malodours. The courtyard area had been refurbished and the hairdressing room and day rooms had been redecorated to a high standard. This supports the delivery of compassionate care.

Areas for Improvement

There were no areas for improvement highlighted as a result of this inspection.

Number of Requirements	0	Number Recommendations:	0
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5.4 Standard 28: Safe and Healthy Working Practices

Is Care Safe? (Quality of Life)

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

One issue was however identified for attention during this estates inspection. This is detailed in the 'areas for improvement' section below.

Is Care Effective? (Quality of Management)

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

Is Care Compassionate? (Quality of Care)

There are health & safety procedures and control measures in place which support the delivery of compassionate care.

Areas for Improvement

It is noted that the Disinfection and descaling of shower heads and associated hoses is currently undertaken at 6 monthly intervals. Current best practice guidance issued by the Northern Ireland Health & Safety Executive would recommend 3 monthly intervals. (HSG274 Part 2: The control of legionella bacteria in hot and cold water systems, 2014)

Number of Requirements	0	Number Recommendations:	1
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5.5 Standard 29: Fire Safety

Is Care Safe? (Quality of Life)

A range of fire protection measures are in place for the premises. This includes a fire detection and alarm system, emergency lighting, first aid fire-fighting equipment, structural fire separation and protection to the means of escape. This supports the delivery of safe care.

Is Care Effective? (Quality of Management)

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

One issue was however identified for attention during this estates inspection. This is detailed in the 'areas for improvement' section below.

Is Care Compassionate? (Quality of Care)

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

Areas for Improvement

Ensure that when the fire risk assessment is next reviewed, the person carrying out the review holds professional body registration or third party certification for fire risk assessment and is registered accordingly with the relevant body. Reference should be made to the latest correspondence issued by RQIA to all registered homes on 2 April 2015 and the guidance contained therein.

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

No additional areas were examined during this inspection.

6. Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Mr Joe Quinn as part of the inspection process. The timescales commence from the date of inspection.

The registered person/manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered person/manager to ensure that all requirements and recommendations contained within the QIP are addressed within the specified timescales.

Matters to be addressed as a result of this inspection are set in the context of the current registration of your premises. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises the RQIA would apply standards current at the time of that application.

6.1 Statutory Requirements

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

6.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and Residential Care Homes Minimum Standards 2011. They promote current good practice and if adopted by the registered person may enhance service, quality and delivery.

6.3 Actions Taken by the Registered Manager/Registered Person

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

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

Quality Improvement Plan

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Recommendations	1					
Recommendation 1	It is noted that the Disinfection and descaling of shower heads and associated hoses is currently undertaken at 6 monthly intervals. Current					
Ref: Standard 28	best practice guidance issued by the Northern Ireland Health & Safety					
	Executive would recommend 3 monthly intervals. (HSG274 Part 2: The					
Stated: First time	control of legione	control of legionella bacteria in hot and cold water systems, 2014)				
To be Completed by:	Response by Re	egistered Manager Detai	ing the Actions	Taken:		
on-going	The Trust estates manager has confirmed that the Belfast Trust have the policy					
	to clean, descale and disinfect all shower heads and hoses on a 6 monthly basis,					
		shower head and hose on an				
		etter than the APCOP recommended and the APCOP recommendation of the APCOP recommendat		erence to the		
	control of legionella bacteria in hot and cold water systems.					
Recommendation 2	Ensure that when the fire risk assessment is next reviewed, the person					
	, , ,	eview holds professional b	, ,			
Ref: Standard 29	certification for fire risk assessment and is registered accordingly with					
	the relevant body. Reference should be made to the latest					
Stated: First time	correspondence issued by RQIA to all registered homes on 2 April 2015 and the guidance contained therein.					
To be Completed by:						
Upon review of Fire risk	Response by Registered Manager Detailing the Actions Taken:					
assessment	The Belfast Trust are currently investigating the options to satisfy the new					
	requirement. In the interim the estates manager and fire officer have					
	emphasised that Ballyowen House is not in any way less safe as the fire risk					
assessments are conducted by a competent Trust fire risk assessor						
Periotored Manager C		Eigenvale Decalin	Date	16/11/2015		
Registered Manager Completing QIP		Fionnuala Breslin	Completed	16/11/2015		
Registered Person Approving QIP		Martin Dillion	Date Approved	24/11/15		
RQIA Inspector Assess	ing Response	Gavin Doherty	Date Approved	16/12/15		

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