



**THE REGULATION AND QUALITY IMPROVEMENT
AUTHORITY**

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ANNOUNCED ESTATES INSPECTION

Inspection No:	IN016767
Establishment ID No:	10711
Name of Establishment:	Willowbank Resource Centre
Date of Inspection:	1 October 2014
Inspector's Name:	Raymond Sayers

1.0 GENERAL INFORMATION

Name of Day Care Centre:	Willowbank Resource Centre
Address:	Carland Rd, Dungannon, BT74 4AA
Telephone Number:	028 8772 2821
Registered Organisation/Provider:	Willowbank Ltd
Registered Manager:	Mrs Ann McGlone
Person in Charge of the centre at the time of Inspection:	Mrs Ann McGlone
Other person(s) consulted during inspection:	
Type of establishment:	Day Care Centre
Date and time of inspection:	1 October 2014 from 10.05 – 12.20hrs
Date of previous estates inspection:	30 August 2011
Name of Inspector:	Raymond Sayers

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 Day Care Settings.

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 Day Care Settings, and to determine the provider's compliance with the following:

- The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003;
- The Day Care Settings Regulations (Northern Ireland) 2007;
- The Day Care Settings Minimum Standards (DHSSPS, 2012).

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:

- Discussion with the person in charge;
- Examination of records;
- Inspection of the centre internally and externally;
- 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 Ann McGlone.

6.0 INSPECTION FOCUS

The inspection sought to establish the level of compliance achieved with respect to the following DHSSPS Day Care Centres Minimum Standards and to assess progress with the issues raised during and since the previous inspection:

Standards inspected:

- Standard 25 - Premises and grounds;
- Standard 27 - Safe and healthy working practices;
- Standard 28 - Fire safety.

7.0 PROFILE OF SERVICE

Willowbank Resource Centre Ltd is a charitable organization which is located on the hospital site in Dungannon Co Tyrone.

Willowbank provides maximum placement for 25 – 30 persons each week day. The arrangements for attendance are flexible and are tailored to meet the assessed needs of service users.

8.0 SUMMARY

Following the Estates Inspection of Willowbank Resource Centre on 1 October 2014 improvements are required to comply with the Day Care Settings Regulations (Northern Ireland) 2007 and the criteria outlined in the following minimum standards:

- Standard 27 - Safe and healthy working practices;
- Standard 28 - Fire safety.

This resulted in three requirements, outlined in the quality improvement plan appended to this report.

The day care centre building fabric and services have been effectively maintained; a water irrigation system has been installed in a poly-tunnel; a legionella risk assessment was not presented for examination

The Estates Inspector would like to acknowledge the assistance of Mrs Ann McGlone during the inspection process.

9.0 INSPECTOR'S FINDINGS

9.1 Recommendations and requirements from previous inspection

It is noted that all of the issues raised in the report of the previous estates inspection on 20 August 2011 have been addressed.

No	Regulation Ref.	Requirements	Action taken - as confirmed during this inspection	Inspector's Comments
1	26.(2)(b)	Complete a condition audit of all interior surfaces, implement repair works and redecorate surface finishes.	Building interior decorative finish in good condition	compliant
2	14.(1)	Submit verification that the electrical installation Periodic Inspection Report is currently valid and compliant with BS7671.	Document verified with QIP return; 15/01/14 BS7671 Periodic Inspection Report examined ; valid until 13 June 2018	compliant
3	26.(4)(d)(i)	Submit verification that the fire detection and alarm system is maintained by a competent person in accordance with BS5839.	Document verified with QIP return; 2 May 2014 BS5839 inspection report examined at inspection.	compliant

No	Regulation Ref.	Requirements	Action taken - as confirmed during this inspection	Inspector's Comments
4	26.(4)(d)(iii)	Submit verification that the emergency lighting installation is maintained by a competent person in accordance with BS5266.	Verified by previous QIP statement; verified examination of 11 June 2014 BS5266 inspection/test record.	compliant
5	26.(4)(a)	Verify that the fire safety risk assessment has been assessed and subsequent control measures implemented.	Verified as implemented by QIP return; 30 September 2014 fire risk assessment audit completed. Report not available for examination.	compliant

No	Minimum Standard Ref.	Recommendations	Action Taken – as confirmed during this inspection	Inspector's Comments
6	23.1	Complete a condition audit for all exterior surfaces, draft a remedial works action plan and implement planned repair works to prevent further deterioration of the external building fabric.	Repairs completed, exterior condition satisfactory	compliant
7	25.1	Establish and maintain a visual "user" inspection record of all electrical equipment by a competent person.	User checks completed	compliant
8	25.0	Submit verification that hoisting equipment is Inspected and maintained in compliance with Lifting Operations and Lifting Equipment Regulations.	Verification submitted with previous QIP return; 25 February and 29 September 2014 LOLER verification records	compliant

9.2 Standard 25 - Premises and grounds - *The premises and grounds are safe, well maintained and remain suitable for their stated purpose*

9.2.1 There is evidence of maintenance activity and the premises are clean and well decorated. The building and engineering services are maintained effectively in compliance with current good practice; no issues have been identified as requiring corrective/improvement works action by the responsible person

9.3 Standard 27 - Safe and healthy working practices - *The centre is maintained in a safe manner*

9.3.1 Safe and healthy working practices are implemented in accordance with this standard, although issues have been identified as requiring corrective and improvement works by the responsible person; these items are detailed in Report paragraphs 9.3.2-9.3.3 and in the attached quality improvement plan section titled '**Standard 27 - Safe and healthy working practices**'.

9.3.2 An irrigation system has been installed in a poly-tunnel to irrigate bedding plants using a sprinkler head system. We are informed that the water is supplied directly from the mains system and that a time clock activates the irrigation. Legionella prevention control measures are not recorded and a legionella risk assessment document was not available for examination.
(Reference: Quality Improvement Plan Item 1)

9.3.3 The last gas safe register safety inspection record was dated 5 February 2013; the gas heater appliance is disconnected and presently not used for heating the poly-tunnels; Mrs McGlone stated that she understood that a gas safe engineer inspection would be required if a gas supply was to be reconnected at a future date.

9.4 Standard 28: Fire safety - *Fire safety precautions are in place that reduce the risk of fire and protect service users staff and visitors in the event of fire.*

9.4.1 Fire Safety procedures in the facility comply with this standard and records inspected demonstrate satisfactory attention to fire safety control measures. There are however issues requiring corrective action, detailed in Report paragraph 9.4.2-9.4.3 and in the attached quality improvement plan section titled '**Standard 28: Fire safety**'.

9.4.2 Mrs McGlone stated that a review of the fire risk assessment was completed on 30 September 2014; the risk assessment report has not yet been forwarded to the facility management.
(Reference: Quality Improvement Plan Item 2)

9.4.3 The fire extinguishers have not been inspected and tested by a competent person within the twelve months of the inspection date; Extinguishers were last inspected/tested on 26 September 2013.
(Reference: Quality Improvement Plan Item 3)

10.0 QUALITY IMPROVEMENT PLAN

The details of the Quality Improvement plan appended to this report were discussed with Mrs Ann McGlone 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 Day Care Settings Regulations (Northern Ireland) 2007 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 centre to improve the quality of life experienced by service users.

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

Announced Estates Inspection

Willowbank Resource Centre Day Care Centre : RQIA ID10711

1 October 2014

QIP Position Based on Comments from Registered Persons (for RQIA use only)			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.	x	x		R.Sayers	09 February 2015
C.	Clarification or follow up required on some items.					

Announced Estates Inspection to Willowbank Resource Centre Day Care Centre on 1 October 2014

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NOTES:

The details of the quality improvement plan were discussed with Mrs Ann McGlone 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 Day Care Settings Regulations (Northern Ireland) 2007 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 centre to improve the quality of life experienced by clients.

The registered provider is required to record comments on the quality improvement plan.

The quality improvement plan is to be completed 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	<i>Ann McGlone</i>
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	<i>Lisa Halliday</i> <i>Matthew Pappi</i>

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Standard 27 - Safe and healthy working practices

The following requirements and recommendations should be noted for action in relation to Standard 27 - Safe and healthy working practices

Item	Regulation References	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
1	Regulations 14(1)(a),(b) &(c)	Complete a site specific legionella risk assessment, implementing recommended control procedures to reduce/eliminate the risk of service users contracting legionnaire's disease. (Reference: Report paragraph 9.3.2)	8 weeks	Basic risk assessment in place also seeking more advice. comply

Standard 28 - Fire Safety

The following requirements and recommendations should be noted for action in relation to Standard 28 - Fire Safety

Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
2	Regulation 26(4)(a)	Obtain a copy of the fire risk assessment and submit for RQIA estates inspector examination & assurance. (Reference: Report paragraph 9.4.2)	8 Weeks	Received and forwarded
3	Regulations 26(4)(d)(i),(iv) & (v)	Submit verification that the fire extinguishers have received an annual competent person test and examination. (Reference: Report paragraph 9.4.3)	8 weeks	Received and forwarded

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