



The Regulation and
Quality Improvement
Authority

**THE REGULATION AND QUALITY IMPROVEMENT
AUTHORITY**

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ANNOUNCED ESTATES INSPECTION

Inspection No:	IN018017
Establishment ID No:	10713
Name of Establishment:	Scraboview Beacon Centre
Date of Inspection:	18 November 2014
Inspector's Name:	Colin Muldoon

1.0 GENERAL INFORMATION

Name of Day Care Centre:	Scraboview Beacon Centre
Address:	81 Victoria Road, Newtownards. BT23 7ED
Telephone Number:	02891 811035
Registered Organisation/Provider:	Northern Ireland Association for Mental Health Responsible Person Mr W H Murphy
Registered Manager:	Mr Darren Lawless
Person in Charge of the centre at the time of Inspection:	Mr Darren Lawless
Other person(s) consulted during inspection:	N/A
Type of establishment:	Day Care Centre
Date and time of Estates inspection:	18 November 2014 10.10 – 13.00
Date of previous Estates inspection:	01 September 2011
Name of Inspector:	Colin Muldoon

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 Mr Darren Lawless
- Examination of records
- Inspection of the centre internally and externally.
- Evaluation and feedback

Any other information received by RQIA about this Registered Provider 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 Mr Darren Lawless.

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

The premises used by Scraboview Beacon Centre is a mid- terrace two storey house close to the centre of Newtownards. Accommodation on the ground floor includes a living room, activity room , dining room, kitchen and toilet. On the first floor there is a communal room, toilet and office space. The centre has a large relatively private garden where there are two cabin type buildings.

8.0 SUMMARY

Following the Estates Inspection of Scraboview Beacon Centre on 18 November 2014 improvements are required to comply with the Day Care Settings Regulations (Northern Ireland) 2007 and the criterion outlined in the following minimum standards:

- Standard 25 - Premises and grounds
- Standard 28 - Fire safety

This resulted in five requirements. These are outlined in the Quality Improvement Plan appended to this report.

The Estates Inspector would like to acknowledge the assistance of Mr Darren Lawless during the inspection process.

9.0 INSPECTOR'S FINDINGS

9.1 Recommendations and requirements from previous Estates inspection on 01 September 2011.

No	Regulation Ref.	Requirements	Action taken - as confirmed during this inspection	Inspector's Comments
9.1.1	Regulation 26.-(2)(l)	Arrangements should be made to have the electrical installation tested and inspected.	The electrical installation was tested and inspected in November 2011. A further report dated December 2011 indicates that remedial work identified in November was carried out. The inspector was informed that, as recommended in the November 2011 report, the electrical installation was tested and inspected during the week commencing 10 November 2014. The report on this inspection had not yet been issued.	Remedial work identified in the report on the latest test and inspection of the electrical installation should be addressed. (Item 1 in Quality Improvement Plan)
9.1.2	Regulation 26.-(4)(a)	The fire risk assessment should be reviewed and actioned as necessary.	The centre had a current fire risk assessment. The assessor considered the overall fire risk to be tolerable and confirmed that remedial action relating to a previous assessment had been satisfactorily addressed.	N/A
9.1.3	Regulation 26.-(4)(d)(v)	Arrangements should be made for the emergency lighting to be function tested monthly.	This is in place.	N/A

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 The centre has a legionella risk assessment which was carried out in May 2012. The assessment made recommendations regarding the daily heating of the calorifier and the maintenance of the thermostatic mixing valve.
(Item 2 in Quality Improvement Plan)

9.2.2 The centre has very recently installed a wooden cabin in the garden which is to be used for a range of activities including woodwork. It is understood that light bench mounted and portable electrical power tools will be used under the supervision of a competent tutor from the local technical college. The use of the cabin for woodworking was discussed with the manager.
(Item 3 in Quality Improvement Plan)

These are detailed in the section of the attached quality improvement plan titled '**Standard 25 - Premises and grounds**'.

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

9.3.1 No issues identified.

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 The fire procedure should be posted at the alarm panel.
(Item 4 in Quality Improvement Plan)

9.4.2 There was combustible material stored under the stairs.
(Item 5 in Quality Improvement Plan)

These issues are detailed in the section of the attached Quality Improvement Plan titled '**Standard 28: Fire safety**'.

10.0 QUALITY IMPROVEMENT PLAN

The details of the Quality Improvement Plan appended to this report were discussed with Mr Darren Lawless 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

Scraboview Beacon Centre

18 November 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		C Muldoon	11/03/2015
C.	Clarification or follow up required on some items.					

NOTES:

The details of the Quality Improvement Plan were discussed with Mr Darren Lawless 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 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	Darren Lawless
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	Billy Murphy

Announced Estates Inspection to Scraboview Beacon Centre 18 November 2014

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Standard 25 - Premises and grounds

The following requirements and recommendations should be noted for action in relation to Standard 25 - Premises and grounds

Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
1	Regulation 26.-(2)(l)	Any issues identified in the report on the November 2014 test and inspection of the electrical installation should be addressed so that the installation is maintained in a satisfactory condition. (Item 9.1.1 in report)	Within timescale recommended by electrical competent person	Recommendations from this report re: door closure and repair of magnetic closure have been fully actioned.
2	Regulation 14.-(1)(a) and (c)	With regard to the control of legionella and the provision of safe hot water: <ul style="list-style-type: none">• The recommendations in the legionella risk assessment regarding the calorifier temperatures should be followed up.• The thermostatic mixing valve should be serviced, cleaned and set• The legionella risk assessment should be reviewed and a program of work put in place to rectify any issues identified. Following the review of the risk assessment the scheme for the control of legionella should be updated as necessary and fully implemented. (Item 9.2.1 in report)	1 Month	Calorifier temperatures are checked and recorded as per Clearwater contract. Where there is a need for action this will be noted and implemented. Thermostatic valves are maintained as part of contract with Clearwater. The legionella risk assessment is a live document which is kept under review by the contractor and Niamh. All recommendations have been actioned and a programme is in place for temperatures, flushing outlets etc.

Announced Estates Inspection to Scraboview Beacon Centre 18 November 2014

Assurance, Challenge and Improvement in Health and Social Care

Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
3	Regulation 14.-(1)(a) and (b) and (c) 26.-(2)(c)	<p>The advice of a competent person should be sought regarding the setting up and risk assessment of the proposed woodwork shop in the garden. Issues to be considered should include;</p> <p>Locking off arrangements to ensure power tools and machinery can only be used under the supervision of a competent person.</p> <p>Effective dust extraction.</p> <p>Layout of machinery and working space.</p> <p>Storage of cutting tools.</p> <p>Storage of materials.</p> <p>Lighting.</p> <p>Personal protective equipment.</p> <p>Maintenance and setting of tools.</p> <p>The safety of other service users using the cabin.</p> <p>(Item 9.2.2 in report)</p>	Before use of new cabin for woodworking activities.	<p>A qualified woodwork tutor has provided a work statement in relation to machinery and use of same.</p> <p>Machinery will only be used under the supervision of the tutor. A kill switch has been requested and will be installed ASAP.</p> <p>Tutor has also ensured a health and safety presentation was made to all participants.</p> <p>Dust extractor has been identified and budgeted for.</p> <p>There will be appropriate locked storage for cutting tools and materials.</p> <p>Lighting installation has now been completed.</p> <p>Gloves, googles and dustmasks have been identified and budgeted for.</p> <p>Tutor/Registered person will be responsible for all maintenance issues.</p>

Announced Estates Inspection to Scraboview Beacon Centre 18 November 2014

Assurance, Challenge and Improvement in Health and Social Care

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)
4	Regulation 26.-(4)(a)	The fire procedure should be posted at the fire panel. (Item 9.4.1 in report)	2 Weeks	This is in place as of 18/11/14
5	Regulation 26.-(4)(b)	The area under the only stairs should be kept free from storage. (Item 9.4.2 in report)	Ongoing	This area has been cleared as of 25/11/14

Announced Estates Inspection to Scraboview Beacon Centre 18 November 2014

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