



The Regulation and  
Quality Improvement  
Authority

**THE REGULATION AND QUALITY IMPROVEMENT  
AUTHORITY**

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**ANNOUNCED ESTATES INSPECTION**

<b>Inspection No:</b>	16936
<b>Establishment ID No:</b>	10746
<b>Name of Establishment:</b>	The Arden Centre
<b>Date of Inspection:</b>	20 August 2014
<b>Inspector's Name:</b>	Phil Cunningham

## 1.0 GENERAL INFORMATION

<b>Name of Day Care Centre:</b>	The Arden Centre
<b>Address:</b>	Scroggy Road Limavady BT49 0AR
<b>Telephone Number:</b>	028 7772 2123
<b>Registered Organisation/Provider:</b>	Western Health and Social Care Trust
<b>Registered Manager:</b>	Irene Smyth, Acting Manager
<b>Other person(s) consulted during inspection:</b>	Jackie Gallagher, WHSCT Estates Department
<b>Type of establishment:</b>	Day Care Centre
<b>Date and time of inspection:</b>	20 August 2014 from 11:00 – 13:00
<b>Date of previous inspection:</b>	19 December 2011
<b>Name of Inspector:</b>	Phil Cunningham

## 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 Centres.

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 Centres 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 Registered 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 Irene Smyth and Jackie Gallagher.

#### **6.0 INSPECTION FOCUS**

The inspection sought to establish the level of compliance achieved with respect to the following DHSSPS Day Care Settings 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 Arden Centre is a small day care centre located on a busy health care site in Limavady. The WHSCT operated centre shares the site with the local health centre, Benbradagh Day Care Centre and a number of other health care and community related establishments. The Arden Centre provides day care services to a maximum of 20 service users with a mental disorder. The day care services are largely provided on the ground floor area of this two storey building with several occasional activities carried out on the first floor. There is adequate car parking provision outside the centre which is located relatively close to local amenities.

## 8.0 SUMMARY

Following the Estates Inspection of The Arden Day Care Centre on 20 August 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 27 - Safe and healthy working practices
- Standard 28 – Fire safety

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

The Estates Inspector would like to acknowledge the assistance of Irene Smyth and Jackie Gallagher during the inspection process.

## 9.0 INSPECTOR'S FINDINGS

### 9.1 Recommendations and requirements from previous inspection

A number of issues were identified for attention by the registered manager following the estates inspection of the Arden Centre on 19 December 2011. These issues had subsequently been addressed, and the Quality Improvement Plan returned by the provider following that inspection outlined the actions which were taken to achieve this. A copy of that Quality Improvement Plan including the provider's responses is available on the RQIA's website under the section titled 'Inspections'.

Of the seven items included in the Quality Improvement Plan, six related to documentation for servicing and checking of the engineering services and equipment in the centre which was not available for inspection during that inspection. While the provider confirmed that these had been addressed on the returned Quality Improvement Plan, they were further confirmed during this inspection. The remaining item related to the installation of a restrictor to a window opening in the relaxation room on the first floor of the centre. Again while the provider confirmed that this had been addressed on the returned Quality Improvement Plan, the inspector confirmed that this was in place during this inspection.

**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 presented as clean and tidy and appeared well maintained. There was good evidence of maintenance activities and records including service reports and certificates were examined during the inspection. Records of In-house checks by staff were available and these generally appeared to be in reasonably good order.

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

9.3.1 By in large, safe and healthy working practices by the provider appear evident in the centre in accordance with this standard although several items are identified for attention by the provider and are included below and in the attached Quality Improvement Plan in the section titled **Standard 27 - Safe and healthy working practices**.

9.3.2 The 'water hygiene' risk assessment was carried out on 8<sup>th</sup> February 2014 and includes an assessment of the measures for the control of legionellae bacteria. The action plan of the report contains a number of items which require attention. The provider should confirm that these have been addressed appropriately or that plans are in place to achieve this within suitable timescales.  
See Item 1 in the attached Quality Improvement Plan.

9.3.3 The 'secondary circulation' feature of the centre's domestic hot water distribution system does not appear to be operating correctly. This leads to insufficient temperatures at hot water outlets in the building within the recognized timescales outlined in the water hygiene assessment report. The provider should undertake remedial measures to address this.  
See Item 2 in the attached Quality Improvement Plan.

9.3.4 The electric shower does not have suitable temperature control and is capable of delivering water at temperatures well in excess of recognized safe levels. The provider should provide shower equipment which is controlled within safe limits or remove the existing unit from use. In the meantime extreme caution should be taken with use of the unit and service users should not be permitted to use same.  
See Item 3 in the attached Quality Improvement Plan.

**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 risk assessment was reviewed on 20<sup>th</sup> February 2014 and the assessment report does not highlight any issues of concern. Records inspected indicate good attention to maintenance and checking of fire safety equipment both by specialist contractors and by staff in the centre.

9.4.2      There is no zone plan provided adjacent to the fire alarm control and indicating panel. The provider should provide the same.  
See Item 4 in the attached Quality Improvement Plan.

## **10.0 QUALITY IMPROVEMENT PLAN**

The details of the Quality Improvement plan appended to this report were discussed with Irene Smyth and Jackie Gallagher 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**



A completed Quality Improvement Plan from the inspection of this service has not yet been returned.

If you have any further enquiries regarding this report please contact RQIA through the e-mail address [info@rqia.org.uk](mailto:info@rqia.org.uk)



The **Regulation** and  
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## Quality Improvement Plan

- for -

## Announced Estates Inspection

- of -

## The Arden Day Care Centre

- on -

**20 August 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.					
C.	Clarification or follow up required on some items.					



**NOTES:**

The details of the Quality Improvement Plan were discussed with Irene Smyth and Jackie Gallagher 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.

The Quality Improvement Plan is to be signed below by the registered provider and registered manager and returned to [estates@rqia.org.uk](mailto: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:**

<b>NAME OF REGISTERED MANAGER COMPLETING QIP</b>	
<b>NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP</b>	

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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 Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
1	14(1)(c)	Provide confirmation that appropriate remedial actions have been carried out to address the action plan contained within the 'water hygiene' risk assessment. See 9.3.2 in report.	8 weeks	
2	14(1)(c)	Carry out remedial actions to address the apparent problem with the secondary circulation of the hot water distribution system. See 9.3.3 in report.	8 weeks	
3	14(1)(c)	Replace the existing shower unit to one incorporating thermostatic control. Alternatively, consider removing the unit including all associated pipework if showering facilities are not required in the centre. In the meantime, do not permit use of the shower by service users. See 9.3.4 in report.	8 weeks	

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## **Standard 28 – Fire Safety**

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

<b>Item</b>	<b>Regulation Reference</b>	<b>Requirements</b>	<b>Timescale</b>	<b>Details Of Action Taken By Registered Person (S)</b>
4	26 (4)(b)	Provide a zone plan adjacent to the fire alarm control and indicating panel. See 9.4.2 in report.	8 weeks	

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