



The Regulation and
Quality Improvement
Authority

**THE REGULATION AND QUALITY IMPROVEMENT
AUTHORITY**

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ANNOUNCED ESTATES INSPECTION

Inspection No:	16758
Establishment ID No:	10758
Name of Establishment:	Appleby SEC
Date of Inspection:	3 July 2014
Inspector's Name:	Raymond Sayers

1.0 GENERAL INFORMATION

Name of Day Care Centre:	Appleby SEC
Address:	43 Ballinahonemore Road Armagh BT60 1JD
Telephone Number:	028 3752 4335
Registered Organisation/Provider:	Southern HSC Trust/ Mrs Mairead McAlinden
Registered Manager:	Ms Margaret McShane
Person in Charge of the centre at the time of Inspection:	Ms Leanna Cornett
Other person(s) consulted during inspection:	Mr Pat Lavery (Southern Health & Social Care Trust Estates Officer)
Type of establishment:	Day Care Centre
Date and time of inspection:	3 July 2014 from 14.00 – 15.50hrs
Date of previous estates inspection:	29 June 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, grounds, building engineering services and equipment used for the purpose of a day care centre. The report details the extent to which the standards examined 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 Ms Leanna Cornett & Mr Pat Laverty;
- 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 Ms Leanna Cornett & Mr Pat Lavery.

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

Appleby Social Education Centre is a statutory day care centre managed by the Southern Health & Social Care Trust and registered with RQIA under article 8(i) of the HPSS (Quality Improvement & Regulation) (Northern Ireland) Order 2003 to accommodate 105 service users with varying degrees of learning disabilities.

The centre is situated in a residential area on the outskirts of the city of Armagh and is operational from Monday to Friday each week, opening at 09.00 and closing at 16.30. The centre closes on public holidays, Easter and July breaks and for Christmas / New Year. Other closures take place for staff training and development. Service Users can attend the centre for day care services on a range of days each week, the majority of service users avail of a five day week placement.

The centre has provision for various therapeutic activity areas, including designated rooms for seven groups of service users depending on their nature and degree of disability. The centre also consists of a number of bathrooms, toilets, a sensory room, large dining room, kitchen, offices, domestic facility and administrative offices. A wide range of equipment to enhance user independence and care is provided. Pictorial and sensory formats are in place to enhance communication for service users who cannot read or who have sensory communication needs. Information boards were displayed in various locations of the centre. A wide variety of colourful art and craft work produced by service users are on display.

The centre has seven day care workers (DCW) who are responsible for programme planning and time-tabling of the core activities of the centre. They are supported by day care support workers.

8.0 SUMMARY

Following the Estates Inspection of Appleby SEC on 3 July 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 25 - Premises and grounds;
- Standard 27 - Safe and healthy working practices;
- Standard 28 - Fire safety.

This resulted in five requirements and two of recommendations, outlined in the quality improvement plan appended to this report.

The facility building fabric is maintained to a satisfactory standard, however a number of building maintenance service certificates are yet to be submitted for examination and are listed in the attached Quality Improvement Plan.

The Estates Inspector would like to acknowledge the assistance of Ms Leanna Cornett during the inspection process.

9.0 INSPECTOR'S FINDINGS

9.1 Recommendations and requirements from previous inspection

The issues listed in the report of the previous estates inspection on 29 June 2011 have been addressed.

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 activities and the premises are clean and well decorated. The building and engineering services are maintained effectively in compliance with current good practice; there are however items requiring corrective/improvement works to comply with this standard, these are detailed in Sections 9.2.2 – 9.2.3 and in the attached quality improvement plan section titled '**Standard 25 - Premises and grounds**'.

9.2.2 Kitchen and staff room decorated wall finishes have sustained some impact damage ; paintwork is chipped.
(Reference: Quality Improvement Plan Item 1)

9.2.3 Group 1 day room has sustained some wall decoration surface damage as a result of impact with wheelchairs/hoists.
(Reference: Quality Improvement Plan Item 1)

- 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 Sections 9.3.2-9.3.7 and in the attached quality improvement plan section titled '**Standard 27 - Safe and healthy working practices**'.
- 9.3.2 The portable electrical appliances were last subjected to Portable Appliance Testing (PAT) on 26 April 2013; estates officer states that electrical appliances PAT contract is currently at tender stage and will be implemented once a new contractor is appointed.
(Reference: Quality Improvement Plan Item 2)
- 9.3.3 Legionella prevention control measures including water temperature monitoring records are available for examination. A legionella risk assessment document is not available for examination. Facility management state that shower heads quarterly sterilization is implemented although not recorded.
(Reference: Quality Improvement Plan Item 4)
- 9.3.4 A BS7671 Periodic Inspection Report for the electrical installation was in progress during the estates inspection.
(Reference: Quality Improvement Plan Item 3)
- 9.3.5 Overhead and mobile hoisting equipment Lifting Operations & Lifting Equipment Regulations (LOLER) thorough examinations reports dated 20 December 2013 were examined.
(Reference: Quality Improvement Plan Item 5)
- 9.3.6 415 volt electrical apparatus is accessible to day care clients at entrances to four in number group rooms; health and safety issues regarding access should be reviewed periodically or when the perceived risk has altered.
(Reference: Quality Improvement Plan Item 6)
- 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 Sections 9.4.2 - 9.4.5, and in the attached quality improvement plan section titled '**Standard 28: Fire safety**'.
- 9.4.2 The last fire risk assessment report was dated 16 May 2012 and a review date was recommended for June 2014.
(Reference: Quality Improvement Plan Item 7)

10.0 QUALITY IMPROVEMENT PLAN

The details of the Quality Improvement plan appended to this report were discussed with Ms Leanna Cornett 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 sign off sheet for estates inspectors

Name of Home	Appleby SEC: RQIA ID no 10758
Date of Inspection	03/07/2014
Estates Inspector	R.Sayers

QIP Position Based on Comments from Registered Persons			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	27/10/2014
C.	Clarification or follow up required on some items.					

Estates Inspection – QIP sign off sheet

Informing and Improving Health and Social Care

NOTES:

The details of the quality improvement plan were discussed with Ms Leanna Cornett during 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	
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	

Announced Estates Inspection to Appleby SEC Day Care Centre on 3 July 2014

Assurance, Challenge and Improvement in Health and Social Care

Standard 25 - Premises and grounds

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

Item	Standard Reference	Recommendations	Timescale	Details Of Action Taken By Registered Person (S)
1	Standard 25.1	Implement decoration repairs in kitchen, staff room and group 1 day-room. (Reference: Report paragraphs 9.2.2 & 9.2.3)	12 weeks	Decoration repairs commenced in areas outlined on 22/9/14

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Assurance, Challenge and Improvement in Health and Social Care

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)
2	Regulations 14 (1)(a) ,(b)&(c)	Confirm implementation and completion of electrical appliances Portable Appliance Testing. (Reference: Report paragraph 9.3.2)	8 weeks	Contract has been awarded and Contractor has been instructed by Estates to complete this work by 29 th august 2014
3	Regulations 14 (1)(a) ,(b)&(c)	Verify completion of BS7671 the Periodic Inspection Report (PIR) for the electrical installation, forward a copy of the PIR for verification by estates inspector. (Reference: Report paragraph 9.3.4)	8 weeks	Electrical Contractor has been asked to provide a Periodic Inspection Report(PIR) as soon as possible.Copy of PIR will be forwarded to RQIA when received.
4	Regulations 14 (1)(a) ,(b)&(c)	Complete a legionella risk assessment, implement recommendations and record control measures. (Reference: Report paragraph 9.3.3)	8 weeks	Legionelle Risk Assessment has been completed. Control measures remain as previous.
5	Regulations 14 (1)(a) ,(b)&(c)	Hoisting equipment must be maintained and inspected in compliance with Lifting Operations and lifting Equipment Regulations standards; six monthly thorough examination frequency. (Reference: Report paragraph 9.3.5)	8 weeks	Arjo-Huntleighhave been awarded contract and Trust requires all maintenance and Inspection of hoists requirements are carried out by end of September 2014.

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Item	Standard Reference	Recommendations	Timescale	Details Of Action Taken By Registered Person (S)
6	Standard 25.7	Investigate, evaluate and monitor the health and safety risk to day-care clients caused by the 415 volt electrical apparatus situated adjacent the entrance/exit door in the group day-rooms. (Reference: Report paragraph 9.3.6)	Immediate & ongoing	Trust Estates arranging a site visit to assess what is required to 'engineer out' low voltage transformer units (415 volt electrical apparatus)

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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)
7	Regulation 26 (4)(a)	Complete a review of the fire safety risk assessment, assess, prioritise and implement any recommended control measures. (Reference: Report paragraph 9.4.2)	8 Weeks	This has been completed. All requirements are being or will be actioned as outlined in Risk assessment (see attached) within the time scale allocated by RQIA

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