



The Regulation and  
Quality Improvement  
Authority

**THE REGULATION AND QUALITY IMPROVEMENT  
AUTHORITY**

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**ANNOUNCED ESTATES INSPECTION**

<b>Inspection No:</b>	IN018031
<b>Establishment ID No:</b>	10790
<b>Name of Establishment:</b>	Towerview Resource Centre
<b>Date of Inspection:</b>	12 February 2015
<b>Inspector's Name:</b>	Colin Muldoon

## 1.0 GENERAL INFORMATION

<b>Name of Day Care Centre:</b>	Towerview Resource Centre
<b>Address:</b>	60 Bristol Park, Newtownards. BT23 4RJ
<b>Telephone Number:</b>	02891 817080
<b>Registered Organisation/Provider:</b>	South Eastern HSC Trust Mr H McCaughey (Responsible Person)
<b>Registered Manager:</b>	Mr Darren Bradshaw
<b>Person in Charge of the centre at the time of Inspection:</b>	Mr Darren Bradshaw
<b>Other person(s) consulted during inspection:</b>	Mr David Currie (Trust Estates Officer)
<b>Type of establishment:</b>	Day Care Centre
<b>Date and time of Estates inspection:</b>	12 February 2015 10.00am – 11.50am
<b>Date of previous Estates inspection:</b>	05 March 2012
<b>Name of Inspector:</b>	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 Bradshaw and Mr David Currie
- 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 Bradshaw and Mr David Currie.

## **6.0 INSPECTION FOCUS**

The inspection sought to establish the level of compliance achieved with respect to the following DHSSPS Day Care Centre's 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**

Towerview Resource Centre is a single storey purpose built facility set within the Four Winds housing development on the outskirts of Newtownards. Accommodation includes a number of activity rooms and areas, a dining room, toilets, hairdressing room and kitchen.

## **8.0 SUMMARY**

Following the Estates Inspection of Towerview Resource Centre on 12 February 2015, 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 Bradshaw and Mr David Currie during the inspection process.

## 9.0 INSPECTOR'S FINDINGS

### 9.1 Recommendations and requirements from previous Estates inspection on 05 March 2012.

No	Regulation Ref.	Requirements	Action taken - as confirmed during this inspection	Inspector's Comments
9.1.1	Regulation 14.-(1)(c)	The provider must get a competent person to investigate the water temperatures which are outside the range for effective legionella control. The provider must ensure that effective remedial action is taken to ensure that hot water is stored, circulated and delivered at a temperature which is in line with ACoP L8. (Item 1 in previous Quality Improvement Plan)	The records available indicate that hot water temperatures at the storage vessel and at sentinel outlets have, over the last few months, sometimes been below that expected for the effective control of legionella.	The reason for the water temperatures being outside the range for effective legionella control should be investigated and the necessary remedial action taken. (Item 1 in Quality Improvement Plan)
9.1.2	Regulation 14.-(1)(c)	The provider must confirm the planned timescale for the legionella risk assessment to be reviewed and actioned. (Item 2 in previous Quality Improvement Plan)	The legionella risk assessment was reviewed at the end of January 2013.	The 2013 risk assessment identified a number of issues requiring remedial action. The current status of these matters could not be confirmed on the day of inspection. Arrangements should be made to review the legionella risk assessment. (Item 2 in Quality Improvement Plan)

9.1.3	Regulation 26.-(2)(c) 26.-(2)(l)	The provider must obtain valid safety certificates which declare that the gas appliances and installation are in satisfactory condition and safe to use. The certificates must be issued by someone who is on the Gas Safe register. (Item 3 in previous Quality Improvement Plan)	Addressed.	N/A
9.1.4	Regulation 26.-(2)(c)	A person with suitable specialist skills and knowledge should regularly maintain, check and set the woodworking machinery including all the guarding and safety devices. (Item 5 in previous Quality Improvement Plan)	Addressed.	N/A
9.1.5	Regulation 26.-(4)(d)(i)	The fire doors between the sitting area and the dining room require to be adjusted to ensure that they provide an effective fire seal. (Item 6 in previous Quality Improvement Plan)	Addressed	N/A

No	Standard	Recommendation	Action taken - as confirmed during this inspection	Inspector's Comments
9.1.6	Standard 25.	Consideration should be given to upgrading the lighting in the sitting area. (Item 4 in previous Quality Improvement Plan)	Addressed	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 client hoist which was serviced in January 2015. There was no documentation relating to the thorough examination of the hoist (required by the Lifting Operations and Lifting Equipment Regulations (NI) 1999)  
(Item 3 in Quality Improvement Plan)

9.2.2 The electrical installation was last tested and inspected in 2009. The report on that inspection recommended a re-test in five years.  
(Item 4 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 risk assessment was reviewed in January 2015. The assessor identified a number of issues which require attention.  
(Item 5 in Quality Improvement Plan)

This issue is 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 Bradshaw and Mr David Currie 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**  
**Towerview Resource Centre**  
**12 February 2015**

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.	x		x	<i>C Muldoon</i>	29/04/2015

**NOTES:**

The details of the Quality Improvement Plan were discussed with Mr Darren Bradshaw and Mr David Currie 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](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>	Darren Bradshaw
<b>NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP</b>	Hugh McCaughey

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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 13.-(7)	The reason for the water temperatures being outside the range expected for effective legionella control should be investigated and the necessary remedial action taken. (Item 9.1.1 in report)  This is a restated requirement	One month	UGH
2	Regulation 13.-(7)	It should be confirmed that a competent person is managing a program of work to address the issues identified in the last legionella risk assessment.  The legionella risk assessment should be reviewed. (Item 9.1.2 in report)	One month  Three months	This has been raised on the 11/03/15 with the Estates Department operations team  review of the Legionella Risk Assessment will be actioned by the Estates Department Operational Team
3	Regulation 26.-(2)(c)	It should be confirmed that the hoisting equipment is being thoroughly examined in accordance with the Lifting Operations and Lifting Regulations (NI) 1999 and that the current certificate of examination verifies that the hoist and associated equipment are without defects. (Item 9.2.1 in report)	One month	A Report of Thorough In Service Examination of Lifting Equipment completed by Bureau Veritas UK Limited: on Report Issued 28/11/2014 Next examination date 28/05/2015 "A. Defects which are or which could become a danger to persons, the remedial actions, and the dates by which defects

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				are to be remedied - None B. Other Defects - None C. Observations - None" a copy of the report is forwarded with this Quality Improvement plan
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4	Regulation 26.-(2)(l)	The electrical installation should be tested and inspected by a competent person. (Item 9.2.2 in report)	Three months	This has been raised on the 11/03/15 with the Estates Department operations team
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<b>Standard 28 - Fire Safety</b>				
<b>The following requirements and recommendations should be noted for action in relation to Standard 28 - Fire Safety</b>				
<b>Item</b>	<b>Regulation Reference</b>	<b>Requirements</b>	<b>Timescale</b>	<b>Details Of Action Taken By Registered Person (S)</b>
5	Regulation 26.-(4)(a)	The issues identified in the fire risk assessment should be addressed within timescales acceptable to the fire risk assessor. (Item 9.4.1 in report)	Ongoing	The Issues Identified in the Fire Risk Assessment has been raised on the 11/03/15 with the Estates Department operations team a number of the issues have been completed and the other issues identified as at the following stages:  The Pottery Kiln to be added to electrical testing - contract from April 2015  Fire hose has been previously decommissioned and removal date

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				<p>to be confirmed by Estates Dept Operational Team.</p> <p>Assessment of issues regarding the upgrading of hazard room doors to smoke rated fire doors is a recommendation which could be looked at in the future, however this is not required to satisfy current legislation.</p> <p>Installation of fire rated roller shutters is due to be looked at throughout Trust premises, this work is planned for 2015/2016</p>
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