

Inspector: Gavin Doherty Inspection ID: IN021566

Lakeland Community Care RQIA ID: 10996 Court House Newtownbutler BT92 8EN

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Announced Estates Inspection of Lakeland Community Care

24 February 2016

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
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1. Summary of Inspection

An announced estates inspection took place on 24 February 2016 from 11.00 to 12.20. Overall on the day of the inspection the premises supported the delivery of safe, effective and compassionate care. Areas for improvement were identified and are set out in the Quality Improvement Plan (QIP) appended to this report. This inspection was underpinned by the;

- 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)

1.1 Actions/Enforcement Taken Following the Last Inspection

Other than those actions detailed in the previous QIP there were no further actions required to be taken following the last inspection.

1.2 Actions/Enforcement Resulting from this Inspection

Enforcement action did not result from the findings of this inspection.

1.3 Inspection Outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	1	0

The details of the QIP within this report were discussed with the Ms Catherine Wheeler as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Organisation/Registered Person: Lakeland Community Care / Patrick McGurn	Registered Manager: Patrick McGurn
Person in Charge of the Premises at the Time of Inspection: Ms Catherine Wheeler	Date Manager Registered: 28 April 2009
Categories of Care: DCS-I, DCS-MP, DCS-MP(E)	Number of Registered Places: 18
Number of Service Users Accommodated on Day of Inspection: Not ascertained	Weekly Tariff at Time of Inspection: Not ascertained

3. Inspection Focus

The inspection sought to assess progress with the issues raised during and since the previous inspection and to determine if the following standards have been met:

Standard 25: Premises and Grounds

Standard 27: Safe and Healthy Working Practices

Standard 28: Fire Safety

4. Methods/Process

Specific methods/processes used in this inspection include the following:

Prior to inspection the following records were analysed: Previous estates inspection report, statutory notifications over the past 12 months.

During the inspection the inspector met with Ms Catherine Wheeler.

The following records were examined during the inspection: Copies of service records and in-house log books relating to the maintenance and upkeep of the building and engineering services.

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the service was an unannounced care inspection dated 22 July 2015. The completed QIP was returned and approved by the care inspector on 26 February 2016.

5.2 Review of Requirements and Recommendations from *the last* Estates Inspection on 15 August 2012

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref:	Confirmation must be obtained from the Landlord that a risk assessment and a suitable written scheme, is in place for the monitoring of the hot and	
Regulation 14 (2)	cold water systems, with regards to the control of legionella bacteria. (Control of legionella bacteria in hot and cold water systems, ACOP 'L8' issued by the Health and Safety Executive NI)	Met
	Action taken as confirmed during the inspection: Confirmed by registered manager in correspondence following inspection.	

Requirement 2 Ref: Regulation 27 (4)	The last recorded fire drill was carried out on 23 February 2011. It is essential that all staff take part in such a drill at least once every 12 months. A fire drill must therefore be carried out without further delay.	Met	
	Action taken as confirmed during the inspection: Confirmed by registered manager in correspondence following inspection.		
Requirement 3 Ref: Regulation 27 (4)	The current fire risk assessment was completed on 20 April 2009, and must be reviewed at least annually. It is essential that this risk assessment is reviewed without further delay to ensure that it remains valid.	Met	
	Action taken as confirmed during the inspection: Confirmed by registered manager in correspondence following inspection.		

5.3 Standard 25: Premises and Grounds - The premises and grounds are safe, well maintained and remain suitable for their stated purpose

Is Care Safe? (Quality of Life)

A range of documentation in relation to the maintenance and upkeep of the premises was presented for review during this estates inspection. This documentation included inspection and test reports for various elements of the engineering services and risk assessments. This supports the delivery of safe care.

Is Care Effective? (Quality of Management)

A range of accommodation, facilities and support services is provided in the premises. This supports the delivery of effective care.

Is Care Compassionate? (Quality of Care)

The areas of the premises reviewed during this estates inspection were well presented, clean and free from malodours. This supports the delivery of compassionate care.

Areas for Improvement

No areas for improvement were identified as a result of this inspection.

Number of Requirements 0 Number Recommendations: 0
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5.4 Standard 27: Safe and Healthy Working Practices - The Centre is maintained in a safe manner, and safe and healthy working practices are promoted in all aspects of its work.

Is Care Safe? (Quality of Life)

A range of documentation relating to the safe operation of the premises, installations and engineering services was presented for review during this estates inspection. This supports the delivery of safe care. A number of issues were however identified for attention during this estates inspection. These are detailed in the 'areas for improvement' section below.

Is Care Effective? (Quality of Management)

The nature and needs of the service users are considered as part of the risk assessment processes and this is reflected in the management of the premises. This supports the delivery of effective care. A number of issues were however identified for attention during this estates inspection. These are detailed in the 'areas for improvement' section below.

Is Care Compassionate? (Quality of Care)

There are health & safety procedures and control measures in place which support the delivery of compassionate care.

Areas for Improvement

It is essential that the registered manager for the service seeks assurances from the premises Landlord that all required statutory safeguards are in place and maintained. This will include:

- risk assessment and suitable control measures in relation to the control of legionella bacteria in the premises hot and cold water systems.
- fire risk assessment and suitable fire safety measures. (At the time of the inspection the date for the servicing of the portable fire-fighting equipment was August 2014).
- inspection and testing of the premises Fixed Electrical Installation, ensuring that this installation is deemed to be 'Satisfactory'.

(Requirement 1 in the attached Quality Improvement Plan)

Number of Requirements	1	Number Recommendations:	0
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5.5 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.

Is Care Safe? (Quality of Life)

A range of fire protection measures are in place for the premises. This includes a fire detection and alarm system, emergency lighting, first aid fire-fighting equipment, structural fire separation and protection to the means of escape. This supports the delivery of safe care.

Is Care Effective? (Quality of Management)

The standard used by the registered person to determine the overall level of fire safety within the premises takes account of the interaction between the physical fire precautions, the fire hazards, the number of residents, the management policies and the availability of adequately trained staff. This standard has been referenced in the fire risk assessment. This supports the delivery of effective care. A number of issues were however identified for attention during this estates inspection. These are detailed in the 'areas for improvement' section below.

Is Care Compassionate? (Quality of Care)

The standard used by the registered persons to determine the extent of fire safety protection measures that are appropriate for the premises recognises the need to maintain a homely, non-institutionalised environment. This supports the delivery of compassionate care.

Areas for Improvement

Ensure that there is a valid fire risk assessment for the premises and that suitable fire safety measures have been implemented and are maintained. (Refer to Requirement 1 in the attached Quality Improvement Plan)

Number of Requirements 0 Number Recommendations: 0
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5.6 Additional Areas Examined

No additional areas were examined as part of this estates inspection.

6. Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Ms Catherine Wheeler as part of the inspection process. The timescales commence from the date of inspection.

The registered person/manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered person/manager to ensure that all requirements and recommendations contained within the QIP are addressed within the specified timescales.

Matters to be addressed as a result of this inspection are set in the context of the current registration of your premises. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises the RQIA would apply standards current at the time of that application.

6.1 Statutory Requirements

This section outlines the actions which must be taken so that the registered person/s meets legislative requirements based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, and The Day Care Settings Regulations (Northern Ireland) 2007

6.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and The Day Care Settings Minimum Standards (DHSSPS, 2012). They promote current good practice and if adopted by the registered person may enhance service, quality and delivery.

6.3 Actions Taken by the Registered Manager/Registered Person

The QIP should be completed by the registered manager to detail the actions taken to meet the legislative requirements stated. The registered person will review and approve the QIP to confirm that these actions have been completed by the registered manager. Once fully completed, the QIP will be returned to Estates.Mailbox@rqia.org.uk and assessed by the inspector.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the service. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not absolve the registered person/manager from their responsibility for maintaining compliance with minimum standards and regulations. It is expected that the requirements and recommendations set out in this report will provide the registered person/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the service.

Quality Improvement Plan

Statutory Requirements

Requirement 1

Ref:

Regulation 14 (2)

Stated: First time

To be Completed by: 20 April 2016

It is essential that the registered manager for the service seeks assurances from the premises Landlord that all required statutory safeguards are in place and maintained. This will include:

- Risk assessment and suitable control measures in relation to the control of legionella bacteria in the premises hot and cold water systems.
- Fire risk assessment and suitable fire safety measures. (At the time
 of the inspection the date for the servicing of the portable firefighting equipment was August 2014).
- Inspection and testing of the premises Fixed Electrical Installation, ensuring that this installation is deemed to be 'Satisfactory'.

Response by Registered Manager Detailing the Actions Taken:

The Control of legionella bacteria in the premises in Newtownbutler: |Inspection carried out by Fermanagh and Omagh District Council in March 2016. Water changed in tank and certified.

The fire extinguishers were upgraded in March 2016.

The inspection and testing of the Fixed Electrical Instalation was carried out in March 2016 by the council who are responsible for the premises. Awaiting the official certificate.

RQIA Inspector Assessing Response	Gavin Doherty	Date Approved	21/4/2016
Registered Person Approving QIP	Pat Mc Gurn	Date Approved	20/4/16
Registered Manager Completing QIP	Pat Mc Gurn	Date Completed	20/04/16

Please ensure the QIP is completed in full and returned to <u>Estates.Mailbox@rqia.org.uk</u> from the authorised email address