



The Regulation and
Quality Improvement
Authority

**THE REGULATION AND QUALITY IMPROVEMENT
AUTHORITY**

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ANNOUNCED ESTATES INSPECTION

Inspection No:	18061
Establishment ID No:	11001
Name of Establishment:	Mourne Stimulus Day Centre, Kilkeel
Date of Inspection:	16 May 2014
Inspector's Name:	K. Monaghan

GENERAL INFORMATION

Name of Centre:	Mourne Stimulus Day Centre
Address:	1 Council Road Kilkeel BT34 4NP
Telephone Number:	028 41 765 897
Registered Responsible Person:	Mr. Isaac Hanna, Mourne Stimulus Day Centre
Registered Manager:	Ms. Melanie Paterson
Person in Charge of the Centre at the time of Inspection:	Ms. Melanie Paterson, Registered Manager
Other person(s) present during inspection:	Ms. Bronagh Trainor, Programme Co-ordinator
Categories of Care:	DCS-LD
Conditions of Registration:	N/A
Number of Registered Places:	37
Date of previous Estates Inspection:	21 June 2011
Date and time of inspection:	16 May 2014 (10:40am. – 12:20pm.)
Name of Inspector:	K. Monaghan

1.0 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 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 the 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, 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
- Day Care Centre, Minimum Standards (DHSSPS) January 2012

Other published standards which guide best practice may also be referenced during the Inspection process.

4.0 METHODS/PROCESSES

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

- Discussions with Ms. Melanie Paterson, Registered Manager and Ms. Bronagh Trainor, Programme Co-ordinator
- Examination of records
- Inspection of the centre internally.
- Evaluation and feedback

Any other relevant 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. Melanie Paterson, Registered Manager and Ms. Bronagh Trainor, Programme Co-ordinator.

6.0 INSPECTION FOCUS

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

Located on the outskirts of Kilkeel, Mourne Stimulus is a single storey building with a horticultural centre at the rear of the premises. It provides a wide range of services and activities for up to 37 clients, who prefer to be known as 'attenders'.

All attenders who have Learning Disabilities of varying degrees are referred to the centre by the local Health and Social Care Trust.

The premises being used for the purposes of the day care centre continue to be improved each year, for example; new fencing to the garden area had recently been provided, two new windows had been installed and new floor coverings had also been provided in some of the rooms. This is to be commended.

8.0 SUMMARY

The premises being used for the purposes of Mourne Stimulus Day Care Centre in Kilkeel were in good order. This is to be commended.

Following the Estates Inspection of this day care centre on 16 May 2014, some 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 nine requirements. These are outlined in the quality improvement plan appended to this report. The Estates Inspector would like to acknowledge the assistance of Ms. Melanie Paterson, Registered Manager and Ms. Bronagh Trainor, Programme Co-ordinator, throughout the inspection process.

9.0 INSPECTION FINDINGS

9.1 Recommendations and requirements from previous inspection 21 June 2011

9.1.1 The following issues should be noted in relation to the issues included in the Quality Improvement Plan for the previous Estates inspection on 21 June 2011:

9.1.2 Ms. Patterson advised that there had been discussions with the local council as the landlord for the premises about the measures that should be in place for the prevention or control of legionella bacteria in the water systems. It is important that this issue is followed up so that the following controls are in place:

- A risk assessment and completed action plan signed off by the Registered Manager
- Monthly temperature checks at the sentinel unblended hot water and cold water outlets in the premises
- Quarterly disinfection of the showers
- Regular inspections of the water systems

Reference should be made to the guidance contained in the 'APPROVED CODE OF PRACTICE AND GUIDANCE L8 Legionnaires disease the control of legionella bacteria in water systems' available free of charge from the Health and Safety Executive. Reference should be made to item 1 in the Quality Improvement Plan.

9.0 INSPECTION FINDINGS CONTINUED

9.1 Recommendations and requirements from previous inspection 21 June 2011 continued

- 9.1.3 The service requirements for the thermostatic mixers should be clarified. The thermostatic mixers should be checked on a regular basis to ensure that the blended hot water at the showers and wash basins is maintained at 41°C maximum. Reference should be made to item 1 in the Quality Improvement Plan.
- 9.1.4 A procedure should be put in place for logging onto the Northern Ireland Adverse Incidents Centre (NIAIC) website each week to check the safety alert broadcasts. A register of log on dates and details of the safety alert broadcasts reviewed at each visit to the website should also be kept on the premises available for review at future inspections. Reference should be made to item 2 in the Quality Improvement Plan.
- 9.1.5 It is good to report that the hoist was serviced on 26 March 2014. In addition to servicing, all lifting equipment should be thoroughly examined on a six monthly basis in accordance with The Lifting Operations and Lifting Equipment Regulations (Northern Ireland) 1999. The reports for these thorough examinations should also contain all of the information set out in Schedule 2 of these regulations. Reference should be made to the guidance which is free of charge from the Health and Safety Executive. Reference should be made to item 3 in the Quality Improvement Plan.
- 9.1.6 The position in relation to addressing the issues noted for attention in the report for the periodic inspection and test of the general electrical installation should be clarified. Documentation to support the action taken in relation to these issues should be retained on the premises available for review at future inspections. Reference should be made to item 4 in the Quality Improvement Plan.
- 9.1.7 The smoke sealing to the corridor fire doors was not fully effective in some places. The switchgear cupboard did not have a fire detector although there was a fire detector located directly outside this cupboard in the corridor. These issues should be given further consideration with the Fire Safety Advisor for the day care centre during the next annual review of the fire risk assessment which has been arranged for 03 June 2014. The outcome of the review in relation to these issues should be confirmed to RQIA. Reference should be made to item 6 in the Quality Improvement Plan.
- 9.1.8 The above issues have been restated where appropriate in the relevant sections of the attached Quality Improvement Plan.

9.0 INSPECTION FINDINGS CONTINUED

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 It is good to report that the premises being used for the purposes of Mourne Stimulus Day Care Centre in Kilkeel were in good order, clean and offered comfortable facilities for the service users. It is good to report that no issues were identified for attention in relation to this standard during this Estates inspection. This is to be commended.

9.3 Standard 27 - Safe and healthy working practices

The day care setting is maintained in a safe manner

- 9.3.1 One issue was identified for attention in relation to this standard as follows:
- 9.3.2 The concrete paving to the external perimeter paths and patio areas was uneven in parts and the grouting had deteriorated. These paths and patio areas should be reviewed and remedial works should be carried out as required. Reference should be made to item 5 in the Quality Improvement Plan.
- 9.3.3 The above issue is detailed in the section of the attached quality improvement plan entitled 'Standard 27 - Safe and healthy working practices'

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 following issues were identified for attention in relation to this standard during this Estates inspection as follows:
- 9.4.2 It is good to report that the Northern Ireland Fire and Rescue Service carried out a fire safety audit for the premises on 07 March 2013 with a satisfactory outcome. The letter from the Northern Ireland Fire and Rescue Service in relation to this audit indicated that there were some issues to be followed up. These should be followed up as part of the review to the fire risk assessment that is scheduled to be completed on 03 June 2014. Reference should be made to item 7 in the Quality Improvement Plan.

9.0 INSPECTION FINDINGS CONTINUED

9.4 Standard 28: Fire safety continued

- 9.4.3 The fire detection and alarm installation and the emergency lighting were inspected and tested on 21 August 2013. In addition the fire alarm is checked each week. The frequency for the inspections and tests to the fire detection and alarm system should be reviewed with the fire alarm engineer and the Fire Risk Assessor for the day care centre. Reference should be made to the guidance contained in British Standard 5839 in relation to this issue. The outcome of this review should be confirmed to RIQA. In addition a monthly function check in accordance with British Standard 5266 should be carried out to each emergency light. The emergency lights should be numbered and a record should be kept for each monthly check. Reference should be made to item 8 in the Quality Improvement Plan.
- 9.4.4 A fire drill was carried out on 12 May 2014. In addition to this fire drill the next session of the annual fire safety training should be provided for all staff. Reference should be made to item 8 in the Quality Improvement Plan.
- 9.4.5 At present two attenders smoke. Individual risk assessments should be carried out in relation to these two people. With regard to the controls that should be in place, particular attention should be given to the arrangements for controlling the smoking materials and the level of supervision required. In addition the fire training for all staff should include the procedure for dealing with a fire involving a person. In this regard the need for a suitable fire blanket in an easily accessible location in close proximity to the area used for smoking should be considered. The Fire Safety Advisor for the day care centre should be consulted in relation to these issues. Reference should be made to item 9 in the Quality Improvement Plan.
- 9.4.6 The above issues are detailed in the section of the attached quality improvement plan entitled 'Standard 28: Fire safety'

10.0 QUALITY IMPROVEMENT PLAN

The details of the Quality Improvement plan appended to this report were discussed with Ms. Melanie Paterson, Registered Manager and Ms. Bronagh Trainor, Programme Co-ordinator, 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 day care 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:

Kieran Monaghan

Regulation and Quality Improvement Authority

9th Floor

Riverside Tower

5 Lanyon Place

BELFAST

BT1 3BT

Kieran Monaghan

Estates Inspector

DATE

Quality Improvement Plan Sign Off Sheet for Estates Inspectors

Name of Home	Mourne Stimulus Day Centre, Kilkeel, RQIA ID 11001
Date of Inspection	16 May 2014
Estates Inspector	Kieran Monaghan

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.	–	–	–	–	–
C.	Clarification or follow up required on some items.	√	–	√	K. Monaghan	30 June 2014

Estates Inspection – QIP sign off sheet

Informing and Improving Health and Social Care

NOTES:

The details of the quality improvement plan were discussed with of Ms. Melanie Paterson, Registered Manager and Ms. Bronagh Trainor, Programme Co-ordinator, 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 day care 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.

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	Melanie Nolan
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	Noel Smyth

Announced Estates Inspection to Mourne Stimulus Day Centre, Kilkeel RQIA ID 11001 on 16 May 2014 (K. Monaghan)

Assurance, Challenge, Improvement in Health and Social Care

Standard 27 - Safe and healthy working practices

The following requirement should be noted for action in relation to Standard 27 - Safe and healthy working practices:

Item	Regulation Reference	Restated Requirements	Timescale	Details Of Action Taken By Registered Person (S)
1.	Regulations 13(7) 14(1)(a) 14(1)(c) 26(2)(c) 26(2)(l)	<p>The following controls should be in place in relation to the prevention or control of legionella bacteria in the water systems:</p> <ul style="list-style-type: none">• A risk assessment and completed action plan signed off by the Registered Manager• Monthly temperature checks at the sentinel unblended hot water and cold water outlets in the premises• Quarterly disinfection of the showers• Regular inspections of the water systems <p>Reference should be made to the guidance contained in the 'APPROVED CODE OF PRACTICE AND GUIDANCE L8 Legionnaires disease the control of legionella bacteria in water systems' available free of charge from the Health and Safety Executive.</p> <p>The service requirements for the thermostatic mixers should also be clarified. The thermostatic mixers should be checked on a regular basis to ensure that the blended hot water at the showers and wash basins is maintained at 41°C maximum. Reference should be made to paragraphs 9.1.2 and 9.1.3 in the report.</p>	1 Month & Ongoing	<p>Jarlath Cunningham is carrying out a full risk assessment on Monday 16th of June 2014 in relation to the prevention of legionella, bacteria in the water system (Will forward once completed and our actions taken).</p> <p>Plumber has been to access recommendations re thermostatic mixers, awaiting same to showers. Clarification will be documented when works has been carried out.</p>

Announced Estates Inspection to Mourne Stimulus Day Centre, Kilkeel RQIA ID 11001 on 16 May 2014 (K. Monaghan)

Assurance, Challenge, Improvement in Health and Social Care

Standard 27 - Safe and healthy working practices

The following requirement should be noted for action in relation to Standard 27 - Safe and healthy working practices:

Item	Regulation Reference	Restated Requirements	Timescale	Details Of Action Taken By Registered Person (S)
2.	Regulations 14(1)(a) 14(1)(c) 26(2)(c)	A procedure should be put in place for logging onto the Northern Ireland Adverse Incidents Centre (NIAIC) website each week to check the safety alert broadcasts. A register of log on dates and details of the safety alert broadcasts reviewed at each visit to the website should also be kept on the premises available for review at future inspections. Reference should be made to paragraph 9.1.4 in the report.	1 Week	A procedure has been implemented for the office administrator to follow, who will log in on a weekly basis. Manager will be notified of any alerts. See procedure attached.
3.	Regulations 14(1)(a) 14(1)(c) 26(2)(c)	In addition to servicing, all lifting equipment should be thoroughly examined on a six monthly basis in accordance with The Lifting Operations and Lifting Equipment Regulations (Northern Ireland) 1999. The reports for these thorough examinations should also contain all of the information set out in Schedule 2 of these regulations. Reference should be made to the guidance which is free of charge from the Health and Safety Executive. Reference should be made to paragraph 9.1.5 in the report.	Ongoing	Lisclare have been contacted, requesting a more thorough servicing report as discussed, however they say their servicing report meets the requirements. See attached email correspondence with Lisclare. We have implemented a daily monitoring of the hoist i.e. general checks and a monthly monitoring of wear and tear of the slings. We have also downloaded the lifting equipment at work H.S.E. which we will make reference too.

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Assurance, Challenge, Improvement in Health and Social Care

Standard 27 - Safe and healthy working practices

The following requirement should be noted for action in relation to Standard 27 - Safe and healthy working practices:

Item	Regulation Reference	Restated Requirements	Timescale	Details Of Action Taken By Registered Person (S)
4.	Regulations 14(1)(a) 14(1)(c) 26(2)(l)	The position in relation to addressing the issues noted for attention in the report for the periodic inspection and test of the general electrical installation should be clarified. Documentation to support the action taken in relation to these issues should be retained on the premises available for review at future inspections. Reference should be made to paragraph 9.1.6 in the report.	1 Month & Ongoing	We have located and have documented evidence from Mourne Electrical Services Ltd who carried out the necessary recommendations from our Periodic Inspection and test of the general electrical installation.
Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
5.	Regulations 14(1)(a) 14(1)(c) 26(2)(b)	The concrete paving to the external perimeter paths and patio areas should be reviewed and remedial works should be carried out as required. Reference should be made to paragraph 9.3.2 in the report.	2 Months	Some Quotes have been sourced, awaiting a decision from our next board meeting however due to financial restraints currently this is not viable.

Announced Estates Inspection to Mourne Stimulus Day Centre, Kilkeel RQIA ID 11001 on 16 May 2014 (K. Monaghan)

Assurance, Challenge, Improvement in Health and Social Care

Standard 28 - Fire Safety

The following requirement should be noted for action in relation to Standard 28 - Fire Safety:

Item	Regulation Reference	Restated Requirements	Timescale	Details Of Action Taken By Registered Person (S)
6.	Regulations 26(4)(b) 26(4)(c) 26(4)(d)(iv)	The standard of smoke sealing to the corridor fire doors and the need for a fire detector in the switchgear cupboard should be given further consideration with the Fire Safety Advisor for the day care centre during the next annual review of the fire risk assessment which has been arranged for 03 June 2014. The outcome of the review in relation to these issues should be confirmed to RQIA. Reference should be made to paragraph 9.1.7 in the report.	1 Month	Fire Risk Assessment was carried out on the 11th of June 2014, awaiting report from Kenny Millsopp. From this risk assessment we will address the issues that you have raised and any other recommendations from Kenny Millsopp.
Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
7.	Regulations 26(4)(b)	The issues identified for attention during the fire safety audit that was carried out to the premises on 07 March 2013 by the Northern Ireland Fire and Rescue Service should be followed up as part of the review to the fire risk assessment that is scheduled to be completed on 03 June 2014. Reference should be made to paragraph 9.4.2 in the report.	1 Month	Contacted Northern Ireland Fire and Rescue Service who confirmed from the audit there was recommendations that the kitchen doors needed smoke sealing, these have been addressed.

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Assurance, Challenge, Improvement in Health and Social Care

Standard 28 - Fire Safety

The following requirement 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)
8.	Regulations 26(4)(b) 26(4)(d)(iv) 26(4)(e)	The frequency for the inspections and tests to the fire detection and alarm system should be reviewed with the fire alarm engineer and the Fire Risk Assessor for the day care centre. Reference should be made to the guidance contained in British Standard 5839 in relation to this issue. The outcome of this review should be confirmed to RIQA. In addition a monthly function check in accordance with British Standard 5266 should be carried out to each emergency light. The emergency lights should be numbered and a record should be kept for each monthly check. The next session of the annual fire safety training should be provided for all staff. Reference should be made to paragraphs 9.4.3 and 9.4.4 in the report.	1 Month	We are in the process of contracting with a new company who will carry out a twelve monthly service to the alarm system and a quarterly general maintenance of the fire alarm and fire detectors. We have now implemented a system where the emergency lights will be checked once a week alongside testing the fire alarm system. Fire training has been scheduled for Tuesday 8th July two hour session for all staff and additional 3 hours training for nominated fire officers

Standard 28 - Fire Safety

The following requirement 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)
9.	Regulations 26(4)(b) 26(4)(d)(i) 26(4)(e)	Individual risk assessments should be carried out in relation to the two attenders who smoke. With regard to the controls that should be in place, particular attention should be given to the arrangements for controlling the smoking materials and the level of supervision required. In addition the fire training for all staff should include the procedure for dealing with a fire involving a person. In this regard the need for a suitable fire blanket in an easily accessible location in close proximity to the area used for smoking should be considered. The Fire Safety Advisor for the day care centre should be consulted in relation to these issues. Reference should be made to paragraph 9.4.5 in the report.	1 Month	There is only one attenders that smokes and a full risk assessment has been carried out. The risk assessment has been discussed with the attender and staff. A full body fire blanket has been purchased and is now in situ at the smoke hut. All staff and the attender are receiving fire training on the 8th of July 2014 which will include the drop and roll technique and four additional staff are receiving additional fire training so that they can carry out the responsibility of being the Fire duty officer.