

Announced Premises Inspection Report 23 November 2016



Praxis Care Foyle Projects

Type of Service: Day Care Setting
Address: Richmond Hall, Eden Terrace, BT48 0DH
Tel No: 028 7137 3400
Inspector: P Cunningham

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Assurance, Challenge and Improvement in Health and Social Care

1.0 Summary

An announced premises inspection of Praxis Care Foyle Projects took place on 23 November 2016 from 13:00 to 14:30hrs.

The inspection sought to assess progress with any issues raised during and since the last premises inspection and to determine if the day care setting was delivering safe, effective and compassionate care and if the service was well led.

Is care safe?

On the day of the inspection the premises supported the delivery of safe care.

Is care effective?

On the day of the inspection the premises supported the delivery of effective care.

Is care compassionate?

On the day of the inspection the premises supported the delivery of compassionate care.)

Is the service well led?

On the day of the inspection the management of the premises was considered to be well led.

This inspection was underpinned by The Day Care Setting Regulations (Northern Ireland) 2007 and The Day Care Settings Minimum Standards (DHSSPS, 2012).

1.1 Inspection outcome

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

This inspection resulted in no requirements or recommendations being made. Findings of the inspection were discussed with Louise Lyons, Team Leader as part of the inspection process and can be found in the main body of the report.

1.2 Actions/enforcement taken following the most recent premises inspection

Other than those actions detailed in the previous QIP there were no further actions required to be taken following the most recent premises inspection dated 9 November 2013

There were no further actions required to be taken following the most recent inspection.

2.0 Service Details

Registered organisation/registered provider: Praxis Care Group	Registered manager: Tracey Marshall
Person in charge of the establishment at the time of inspection: Louise Lyons, Team Leader	Date manager registered: 12 September 2013
Categories of care: DCS-LD	Number of registered places: 35

3.0 Methods/processes

Prior to inspection the following records were analysed: Previous premises inspection report, statutory notifications over the past 12 months, duty call log.

During the inspection the inspector met with Louise Lyons, Team Leader

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, legionellae risk assessment, fire risk assessment.

4.0 The inspection

4.1 Review of requirements and recommendations from the most recent inspection dated 06 October 2016

The most recent inspection of the day care setting was an unannounced care inspection. The completed QIP will be validated by the specialist inspector when it has been returned and at their next inspection.

4.2 Review of requirements and recommendations from the last premises inspection dated 09 October 2013

Last premises inspection statutory requirements		Validation of compliance
Requirement 1 Ref: Regulation 14(1)(a)	Carry out remedial works to address the defects listed in the periodic testing and inspection report for the fixed wiring installation	Met
	Action taken as confirmed during the inspection: Provider confirmed that the remedial works had been completed.	
Requirement 2 Ref: Regulation 26(4)(d)(i)	Cease wedging the door open to the main kitchen. If this door is required to remain open for operational or other reasons, a suitable hold open device should be provided which releases the door on activation of the automatic fire alarm and detection system.	Met
	Action taken as confirmed during the inspection: Automatic hold open devices were provided to three doors in the centre	
Last premises inspection recommendations		Validation of compliance
Recommendation 1 Ref: Standard 27.1	Liaise with the legionellae risk assessor regarding the appropriateness of the checks to the domestic water system.	Met
	Action taken as confirmed during the inspection: The legionella risk assessment was reviewed on 23 March 2016 and a range of control measures are in place.	
Recommendation 2 Ref: Standard 28.2	Provide automatic fire detection linked to the fire alarm and detection system in the main electrical room to replace the stand alone detector currently provided.	Met
	Action taken as confirmed during the inspection: An automatic fire detector linked to the automatic fire alarm and detection system has been installed in the electrical cupboard.	

4.3 Is care safe?

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

Documentation relating to the safe operation of the premises, installations and engineering services was presented for review during this premises inspection.

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.

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 service users, 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 safe care.

Number of requirements	0	Number of recommendations:	0
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4.4 Is care effective?

There are arrangements in place for routine premises management and upkeep as well as timely breakdown/repair maintenance. Service users are involved where appropriate in decisions around the upkeep of the premises.

This supports the delivery of effective care.

Number of requirements	0	Number of recommendations:	0
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4.5 Is care compassionate?

The areas of the premises reviewed during this premises inspection were well presented, comfortable, clean, free from malodours and adequately lit.

Service users are consulted about decisions around décor where appropriate.

This supports the delivery of compassionate care.

Number of requirements	0	Number of recommendations:	0
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4.6 Is the service well led?

Premises related policies and documentation are retained in a manner which is accessible to relevant people.

Arrangements are in place for managing premises related incidents/notifiable events and Medical Device and Equipment Alerts.

The registered person has dealt appropriately with previous RQIA QIP items and other relevant issues relating to the premises and has been adequately supported and resourced by the registered responsible person.

There are appropriate relationships with maintenance personnel, specialist contractors and other statutory regulators where appropriate.

This supports a well led service.

Number of requirements	0	Number of recommendations:	0
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5.0 Quality improvement plan

There were no issues identified during this inspection, and a QIP is neither required, nor included, as part of this inspection report.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not exempt the registered provider from their responsibility for maintaining compliance with the regulations and standards.



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