



The Regulation and
Quality Improvement
Authority

**THE REGULATION AND QUALITY IMPROVEMENT
AUTHORITY**

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ANNOUNCED ESTATES INSPECTION

Inspection No:	IN016768
Establishment ID No:	11052
Name of Establishment:	Woodlands Beacon Centre
Date of Inspection:	23 September 2014
Inspector's Name:	Raymond Sayers

1.0 GENERAL INFORMATION

Name of Day Care Centre:	Woodlands Beacon Centre
Address:	48c Molesworth Street Cookstown BT80 8PA
Telephone Number:	028 8676 6619
Registered Organisation/Provider:	Northern Ireland Association for Mental Health(NIAMH)
Registered Manager:	Ms Dorothy Devlin
Person in Charge of the centre at the time of Inspection:	Ms Dorothy Devlin
Other person(s) consulted during inspection:	Ms Fiona Hegarty, NIAMH Assistant Health & Safety Manager
Type of establishment:	Day Care Centre
Date and time of inspection:	23 September 2014 from 10.00 – 11.45hrs
Date of previous inspection:	10 August 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 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 the person in charge;
- 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 Dorothy Devlin & Ms Fiona Hegarty.

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 .

Woodlands Day Centre is held in a two storey house situated in Molesworth Street on the outskirts of Cookstown. The Day Centre is one of fourteen Day Support Services which operate throughout Northern Ireland and are run by a charitable organization, Northern Ireland Association for Mental Health (NIAMH).

The Woodlands centre house formerly belonged to the railways and is a “listed” building. The Woodlands centre has two stories, the front door opens in to a small entrance hall, to the right there is a kitchen and attached sitting area, a downstairs toilet and utility area and a woodwork room, to the left there is a living room and a quiet room which service users can sit in at any time.

The second floor comprises of an activities room, two offices and a toilet.

The day centre is held on Monday, Wednesday, Thursday and Friday and can accommodate twenty service users. Wednesday is for the “eighteen to forty” age group and the other days cater for all ages. The centre opens on a Friday from 9.00am-2.00pm, this shorter day focuses on relaxation and those service users who wish can avail of the woodwork programme on that day.

The day service is closed on a Tuesday.

8.0 SUMMARY

Following the Estates Inspection of Woodlands Beacon Centre on 23 September 2014 improvements are required to comply with the Day Care Settings Regulations (Northern Ireland) 2007 and the criteria outlined in the following minimum standard:

- Standard 27 - Safe and healthy working practices.

This resulted in one requirement listed the quality improvement plan appended to this report.

The building interior has been refurbished; all building interior wall and floor finishes are in a good condition. Works are presently in progress to implement exterior fabric repairs.

Building services are maintained effectively in accordance with good practice.

Fire safety and legionella control measures are implemented in compliance with site specific risk assessments.

The Estates Inspector would like to acknowledge the assistance of Ms Dorothy Devlin and Fiona Hegarty during the inspection process.

9.0 INSPECTOR'S FINDINGS

9.1 Recommendations and requirements from previous inspection

All issues raised in the report of the previous estates inspection on 10 August 2011 have been addressed.

No	Regulation Ref.	Requirements	Action taken - as confirmed during this inspection	Inspector's Comments
1	Regulation 14.(1)(a)	Examine and monitor condition of door threshold at sitting/quiet room junction. Implement repairs to eliminate potential trip hazard	Positive response on 29 September 2011 QIP return, implemented during building refurbishment contract.	Remedial works completed.
2	Regulation 14.(1)(a)	Implement and record staff/user inspection regime for electrical appliances in compliance with the Electricity at Work Regulations.	Positive response on 29 September 2011 QIP response, implemented during building refurbishment contract..	Remedial works completed.
3	Regulation 14.(1)(a)	Review legionellosis control risk assessment confirming that the hot & cold water storage distribution system is compliant with L8 Legionnaires disease Approved Code of Practice & Guidance.	Positive response on 29 September 2011 QIP response, verified as implemented. Legionella Risk assessment dated 17 April 2014	Remedial works completed.

No	Minimum Standard Ref.	Recommendations	Action Taken – as confirmed during this inspection	Inspector's Comments
4	Standard 23.1	Complete an audit of all interior and exterior decorated surfaces and implement a planned redecoration works programme.	Positive response on 29 September 2011 QIP response, verified as implemented. Interior redecoration works completed and exterior repair works currently in progress.	Interior remedial works completed, external repair works in progress.
5	Standard 23.1	Investigate damp penetration defect on dining room front elevation wall, implement repair works.	Positive response on 29 September 2011 QIP response, repair works completed.	Remedial works completed.

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 no issues recorded as requiring corrective/ improvement works action by the responsible person.

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; no issues have been identified as requiring corrective/improvement works action by the responsible person

9.3.2 An external activity area sewer inspection chamber lid and frame was raised above the adjacent ground level, this was a health and safety trip hazard; management stated that the local district council health & safety inspector had noted the issue and arrangements had been made to rectify the defect.
(Reference: Quality Improvement Plan Item 1)

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 day centre comply with this standard and records inspected demonstrate satisfactory attention to fire safety control measures. There are no issues recorded as requiring corrective/ improvement works action by the responsible person.

10.0 QUALITY IMPROVEMENT PLAN

The details of the Quality Improvement plan appended to this report were discussed with Ms Dorothy Devlin 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 residents.

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**



The **Regulation** and
Quality Improvement
Authority

Quality Improvement Plan

Announced Estates Inspection

Woodlands Beacon Centre Day Care Centre: RQIA ID 11052

23 September 2014

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.					

NOTES:

The details of the quality improvement plan were discussed with Ms Dorothy Devlin and Ms Fiona Hegarty 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	Dorothy Devlin
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	Billy Murphy

Announced Estates Inspection to Woodlands Beacon Centre Day Care Centre on 23 September 2014

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)
1	Regulation 14.(1)(a)	Eliminate trip hazard at sewer inspection chamber located in external activity area. Implement management controls to reduce/eliminate risk until remedial works have been completed. (Reference: Report paragraph 9.3.2)	12 weeks	Waterline contacted & work to be completed - REF: C8174330 - (Defective Surface cover)

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