

Inspection ID: IN021509

Age NI Dungannon RQIA ID: 11053 2 - 4 Little Scotch Street Dungannon BT70 1AP

Tel: 028 87752383 Email: pat.kearney@ageni.org

Announced Estates Inspection of Age NI, Dungannon

23 July 2015

The Regulation and Quality Improvement Authority 9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT Tel: 028 9051 7500 Fax: 028 9051 7501 Web: www.rqia.org.uk

## 1. Summary of Inspection

An announced estates inspection took place on 23 July 2015 from 10.15hrs to 12.00hrs. 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 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 items 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 Ms Patricia Kearney, Manager as part of the inspection process. The timescales for completion commence from the date of inspection.

# 2. Service Details

Registered Organisation/Registered Person:	Registered Manager:
Age NI/Linda Robinson	Ms Patricia Kearney
Person in Charge of the Premises at the Time of Inspection: Ms Patricia Kearney	Date Manager Registered: 26 May 2009
Categories of Care:	Number of Registered Places:
DCS-I & DCS-DE	20
Number of Service Users Accommodated on Day of Inspection: 5	Weekly Tariff at Time of Inspection: <i>Trust rates</i>

## 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 Patricia Kearney (Manager).

The following records were examined during the inspection: Copies of service records, maintenance log books relating to the engineering services, legionellae risk assessment and fire risk assessment.

# 5. The Inspection

# 5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the service was an announced care inspection dated 16 June 2015. The completed QIP was returned and approved by the care inspector.

# 5.2 Review of Requirements and Recommendations from the last Estates Inspection dated 6 November 2012.

Previous Inspection Recommendations		Validation of Compliance	
Recommendation 1 Ref: Standard 25.7	Verify that the facility BS7671 Periodic Inspection report for the electrical installation is currently valid and that the installation is compliant with the Electricity at Work Regulations.	Met	
	Action taken as confirmed during the inspection: BS76721 Periodic inspection report dated 25 November 2013, valid for five years.		
Recommendation 2 Ref: Standard 25.7	Verify that the Thermostatic Mixing Valves (TMVs) are currently maintained in compliance with Health Technical Memorandum 04-01: The Control of Legionella, Hygiene, `safe` hot water, cold water and drinking systems.	Met	
	Action taken as confirmed during the inspection: TMVs maintained and records examined.		

**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 documents in related to the maintenance 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.

[An issue was however identified for attention during this Estates inspection and is detailed in the 'areas for improvement' section below.]

# 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.

(There were no issues identified for attention during this Estates inspection.)

# Is Care Compassionate? (Quality of Care)

The accommodation reviewed during this Estates inspection was well presented, clean and free from malodours. This supports the delivery of compassionate care.

(There were no issues identified for attention during this Estates inspection.)

## **Areas for Improvement**

Client support grab-rails located in WC/ shower areas have sustained surface corrosion and would therefore pose an infection control risk.

Refer to Quality Improvement Plan Requirement 1.

Number of Requirements	1	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 documents related 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.

(There were no issues identified for attention during this Estates inspection.)

# Is Care Effective? (Quality of Management)

The dependency and care 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.

(There were no issues identified for attention during this Estates inspection.)

## Is Care Compassionate? (Quality of Care)

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

(There were no issues identified for attention during this Estates inspection.)

# Areas for Improvement

Not applicable

Number of Requirements	0	Number Recommendations:	0

**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, including: 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.

(There were no issues identified for attention during this Estates inspection.)

## 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.

(There were no issues identified for attention during this Estates inspection.)

## Is Care Compassionate? (Quality of Care)

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

(There were no issues identified for attention during this Estates inspection.)

## Areas for Improvement

Not applicable.

Number of Requirements 0 Nu	lumber Recommendations:	0	
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## 5.6 Additional Areas Examined

Not applicable.

## 6. Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Ms Patricia Kearney, Manager 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 <u>estates.mailbox@rqia.org.uk</u> 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

Quality Improvement Plan				
Statutory Requirements	S			
Requirement 1	Replace corrode existing grab-rail	d grab-rails or apply new p s.	protective surface	e finish to
Ref: Regulation				
26.(2)(d)	<b>Response by Registered Manager Detailing the Actions Taken:</b> Replacement grab rails have been requested and will be fitted asap			
Stated: First time				
To be Completed by: 15 October 2015				
Registered Manager Co	ompleting QIP	Patricia Kearney	Date Completed	13/8/15
Registered Person App	Approving QIP Linda Robinson		Date Approved	09/08/15
<b>RQIA Inspector Assess</b>	ing Response	Raymond Sayers	Date Approved	14/09/15

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