

**Announced Estates Inspection
of
Meadowcraft Day Centre incorporating The Church Hall
11 August 2015**

1. Summary of Inspection

An announced estates inspection took place on 11 August 2015 from 14.00hrs to 16.00hrs. 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;

- 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 | 0 | 0 |

This inspection resulted in no requirements or recommendations being made. Findings of the inspection can be found in the main body of the report.

2. Service Details

| | |
|---|--|
| Registered Organisation/Registered Person: Armagh Care Services/Mr Daniel McHugh | Registered Manager: Mr Daniel McHugh |
| Person in Charge of the Premises at the Time of Inspection: Mr Paul Murtagh (Assistant Manager) | Date Manager Registered: 04 December 2008 |
| Categories of Care: DCS-LD, DCS-LD(E) | Number of Registered Places: 60 |
| Number of Service Users Accommodated on Day of Inspection: 29 | Weekly Tariff at Time of Inspection: Trust rates |

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 and themes 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 and statutory notifications over the past 12 month period.

During the inspection the inspector met with Mr Paul Murtagh.

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

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the service was an unannounced care inspection, IN023522, dated 06 August 2015. The completed QIP has not yet been returned for review and subsequent assessment by the care inspector.

5.2 Review of Recommendations from the last Estates Inspection completed on 27 November 2012

| Previous Inspection Recommendations | | Validation of Compliance |
|--|---|--------------------------|
| Recommendation 1 Ref: Standard 25.1 | Inspect all floor covering/WC pan junctions and apply silicone sealant to joints, creating an impermeable/washable surface. | Met |
| | Action taken as confirmed during the inspection: Works implemented. | |

| | | |
|--|---|------------|
| Recommendation 2 Ref: Standard 27.1 | Implement Lifting Operations and Lifting Equipment Regulations (LOLER) thorough examination report recommended improvement works actions. | Met |
| | Action taken as confirmed during the inspection: Works implemented. | |
| Recommendation 3 Ref: Standard 27.1 | Assess BS7671 Periodic Inspection Report corrective & improvement works recommendations, verify that improvement works recommendations are completed or inserted on a works action plan for implementation. | Met |
| | Action taken as confirmed during the inspection: Items assessed and addressed. | |
| Recommendation 4 Ref: Standard 28.2 | Install an automatic fire detection sensor in first floor store room containing electrical distribution board, & adjust/rehang fire door. | Met |
| | Action taken as confirmed during the inspection: Items assessed and addressed. | |

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 relating to the maintenance and inspection of the premises were presented for review during this Estates inspection. The documentation included: inspection/ test reports for building engineering services and associated risk assessments. This supports the delivery of safe care.

[There were no issues identified for attention during this Estates inspection.]

Is Care Effective? (Quality of Management)

A range of accommodation, facilities and support services are 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 inspected was maintained in a good condition, clean and free from malodours. This supports the delivery of compassionate care.

Areas for Improvement

N/A

| | | | |
|-------------------------------|----------|--------------------------------|----------|
| Number of Requirements | 0 | Number Recommendations: | 0 |
|-------------------------------|----------|--------------------------------|----------|

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)

Documents related to the safe operation of the premises, installations and engineering services were 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 needs of the patients are considered as part of the risk assessment processes, and this is reflected in the management of the home. 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 & safety procedures plus 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

N/A

| | | | |
|-------------------------------|----------|--------------------------------|----------|
| 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, 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.

[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 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.

[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 that are appropriate for the premises 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

N/A

| | | | |
|-------------------------------|----------|--------------------------------|----------|
| Number of Requirements | 0 | Number Recommendations: | 0 |
|-------------------------------|----------|--------------------------------|----------|

5.6 Additional Areas Examined

N/A

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 centre. 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 centre.

No requirements or recommendations resulted from this inspection.

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|--|------------------------|-----------------------|----------|
| I agree with the content of the report. | | | |
| Registered Manager | Mr Daniel James McHugh | Date Completed | 10/09/15 |
| Registered Person | Mr Daniel James McHugh | Date Approved | 10/09/15 |
| RQIA Inspector Assessing Response | Raymond Sayers | Date Approved | 14/09/15 |

Please provide any additional comments or observations you may wish to make below:

Please complete in full and returned to Estates.Mailbox@rqia.org.uk from the authorised email address