

Announced Premises Inspection Report 31 May 2016











GROVE DAY CENTRE AGE NI

Type of Service: Day Care Setting
Address: 8 Antrim Road, Ballnahinch, BT24 8AN
Tel No: 028 9756 5631

Inspector: Gavin Doherty

1.0 Summary

An announced premises inspection of Grove Day Centre Age NI took place on 31 May 2016 from 10:30 to 12:00.

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. However, one issue was identified for attention by the registered person. Refer to section 4.5 for further details.

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 Settings Regulations (Northern Ireland) 2007 and The Day Care Settings Minimum Standards (DHSSPS, 2012).

1.1 Inspection outcome

	Requirements	Recommendations
Total number of requirements and	0	1
recommendations made at this inspection	0	l

Details of the Quality Improvement Plan (QIP) within this report were discussed with Darran McQuoid, registered manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

Enforcement action did not result from the findings of this inspection.

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 last inspection.

2.0 Service Details

Registered organisation/registered person: Age NI	Registered manager: Darran McQuoid
Person in charge of the establishment at the time of inspection: Darran McQuoid	Date manager registered: 24 November 2015
Categories of care: DCS-I, DCS-LD(E), DCS-PH(E)	Number of registered places: 15

3.0 Methods/processes

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

Discussion took place with Darran McQuoid, Registered Manager.

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

4.0 The inspection

4.1 Review of requirements and recommendations from the most recent inspection dated 17/09/2015

The most recent inspection of the establishment was an unannounced care inspection. The completed QIP was returned and approved by the specialist inspector on 25 November 2015.

4.2 Review of requirements and recommendations from the last premises inspection dated 4/3/2009.

Last premises insp	ection statutory requirements	Validation of compliance
Requirement 1 Ref: Regulation	The damage to the plaster finish of the wall in the Bathroom should be made good.	
27 (2)	Action taken as confirmed during the inspection: Inspector confirmed this work had been completed	Met
Stated: First time	at the time of inspection.	
Requirement 2 Ref: Regulation 14 (1) Stated: First time	The manager stated that the bath hoist in the bathroom was used on a weekly basis by one or two clients. The trust should ensure that this hoist is serviced in line with the manufacturer's recommendations (service overdue) and receives suitable and sufficient 'thorough examination' in accordance with the LOLER Regulations 1998.	Met
	Action taken as confirmed during the inspection: Inspector confirmed that a current 'Thorough Examination' of the bath hoist had been carried out on 12 January 2016 and no remedial actions were necessary at this time.	

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.

No areas for improvement were identified during the inspection.

Number of requirements	0	Number of recommendations:	0
------------------------	---	----------------------------	---

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.

No areas for improvement were identified during the inspection.

Number of requirements	Number of requirements	0	Number of recommendations:	0
------------------------	------------------------	---	----------------------------	---

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 and furnishings where appropriate. This supports the delivery of compassionate care.

One issue was however identified for attention during this inspection. This is detailed in the 'areas for improvement' section below.

Areas for improvement

The level of decoration in the bathroom, main corridor and main activity room of the centre was tired. Also the floor finish in the main activity room was in poor condition. The manager should prepare a suitable time bound program for the redecoration of these areas and the replacement of the main activity room floor finish. This should be forwarded to RQIA for approval.

Number of requirements	0	Number of recommendations:	1
------------------------	---	----------------------------	---

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 provider 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 provider.

There are appropriate relationships with maintenance personnel, specialist contractors and other statutory regulators where appropriate. This supports a well led service.

A number of issues were however identified for attention during this inspection. These are detailed in the 'areas for improvement' section below.

No areas for improvement were identified during the inspection.

Number of requirements	Λ	Number of recommendations:	Λ
Mulliper of requirements	U	Nulliber of recommendations.	U

5.0 Quality improvement plan

Any issues identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Darran McQuoid, registered 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 provider 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 the day care setting. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises, RQIA would apply standards current at the time of that application.

5.1 Statutory requirements

This section outlines the actions which must be taken so that the registered person/manager meets legislative requirements based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Day Care Settings Regulations (Northern Ireland) 2007.

5.2 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.

5.3 Actions taken by the Registered Provider

The QIP should be completed and detail the actions taken to meet the legislative requirements stated. The registered provider should confirm that these actions have been completed and return completed QIP to estates.team@rgia.org.uk for review by the inspector.

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. It is expected that the requirements and recommendations outlined in this report will provide the registered provider with the necessary information to assist them to fulfil their responsibilities and enhance practice within the service.

Quality Improvement Plan		
Recommendations		
Recommendation 1	The manager should prepare a suitable time bound program for the redecoration of the bathroom, main corridor and main activity room of	
Ref: Standard 25.1	the centre, and the replacement of the main activity room floor finish. This should be forwarded to RQIA for information.	
Stated: First time		
	Response by registered person detailing the actions taken:	
To be completed by: 23 August 2016	Estates Manager has been contacted and a meeting to discuss requirements has been requested.	

^{*}Please ensure this document is completed in full and returned to estates.team@rqia.org.uk from the authorised email address*





The Regulation and Quality Improvement Authority

9th Floor

Riverside Tower

5 Lanyon Place

BELFAST

BT1 3BT

Tel 028 9051 7500

Fax 028 9051 7501

Email info@rqia.org.uk

Web www.rqia.org.uk

@RQIANews