



The Regulation and  
Quality Improvement  
Authority

Lakeland Community Care Belcoo  
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**Announced Estates Inspection  
of  
Lakeland Community Care, Belcoo**

**13 October 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](http://www.rqia.org.uk)

## 1. Summary of Inspection

An announced estates inspection took place on 13 October 2015 from 10.00 to 12.15 hours. 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
<b>Total number of requirements and recommendations made at this inspection</b>	2	1

The details of the QIP within this report were discussed with the Mr Patrick McGurn (Manager/Responsible Person) as part of the inspection process. The timescales for completion commence from the date of inspection.

## 2. Service Details

<b>Registered Organisation/Registered Person:</b> Lakeland Community Care Ltd/Mr Patrick McGurn	<b>Registered Manager:</b> Mr Patrick McGurn
<b>Person in Charge of the Premises at the Time of Inspection:</b> Mr Patrick McGurn	<b>Date Manager Registered:</b> 28/10/09
<b>Categories of Care:</b> DCS-I, DCS-MP	<b>Number of Registered Places:</b> 14
<b>Number of Service Users Accommodated on Day of Inspection:</b> 12	<b>Weekly Tariff at Time of Inspection:</b> 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's period.

During the inspection the inspector met with Mr Patrick McGurn.

The following records were examined during the inspection: Copies of building services maintenance certificates, building user maintenance log books, legionellae & fire risk assessments.

### 5. The Inspection

N/A

#### 5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the service was a Primary Announced care inspection, IN020150 dated 03 July 2014. The completed QIP was returned, and assessed as satisfactory by the care inspector on 26 August 2014.

#### 5.2 Review of Requirements and Recommendations from *the last* Estates Inspection on 20 November 2012

Previous Inspection Statutory Requirements		Validation of Compliance
<b>Requirement 1</b> Ref: Regulation 14.(1)(a),(b) &(c)	Submit landlord verification that the hot/cold water storage and distribution systems are maintained in compliance with Health and Safety Executive Approved Code of Practice "L8" Legionnaires disease" The Control of Legionella bacteria in water systems.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Verified as implemented.	

<b>Requirement 2</b>  <b>Ref:</b> Regulation 26.(4)(a)	Review the fire safety risk assessment and implement any recommended control measures/procedures, in compliance with the Fire safety regulations Northern Ireland 2010 and Northern Ireland Health Technical Memorandum 86 Part 1:Fire Risk assessment in community Healthcare Premises` (NIHTM86)	<b>Met</b>
<b>Action taken as confirmed during the inspection:</b> Risk assessment completed and controls implemented.		
<b>Previous Inspection Recommendations</b>		<b>Validation of Compliance</b>
<b>Recommendation 1</b>  <b>Ref:</b> Standard 27.1	Inspect all hot surfaces/hot water outlets , record and implement risk assessments plus control procedures in accordance with National Health Service Guidance Note `safe` hot water and surface temperatures.	<b>Met</b>
<b>Action taken as confirmed during the inspection:</b> Control measures implemented.		

**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 related to the maintenance of the premises was presented for review during this Estates inspection. The documentation included inspection and test reports for elements of the 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 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 maintained, 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

<b>Number of Requirements</b>	<b>0</b>	<b>Number Recommendations:</b>	<b>0</b>
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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)

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.

[Issues were identified for attention during this Estates inspection and are detailed in the 'areas for improvement' section below.]

#### Is Care Effective? (Quality of Management)

The dependency and needs of the residents are considered in the risk assessment processes; 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 & 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

The BS7671 Periodic Inspection Report certificate for the electrical installation reference IPN3/006175 was completed on 13 February 2012 and listed as valid for three years. Refer to Quality Improvement Plan Requirement 1.

The annual space heating oil boiler maintenance certificate was not available for inspection. Refer to Quality Improvement Plan Recommendation 1.

<b>Number of Requirements</b>	<b>1</b>	<b>Number Recommendations:</b>	<b>1</b>
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**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 assess the 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 and 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 assess the extent of fire safety protection required 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**

The last BS5839 fire detection and alarm system maintenance certificate presented for inspection was dated 12 March 2014.

Refer to Quality Improvement Plan Requirement 2.

The last BS5266 emergency lighting system maintenance certificate presented for inspection was dated 17 February 2013.

Refer to Quality Improvement Plan Requirement 2.

<b>Number of Requirements</b>	<b>1</b>	<b>Number Recommendations:</b>	<b>0</b>
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**5.6 Additional Areas Examined**

N/A

## 6. Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Mr Patrick McGurn, 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 [Estates.Mailbox@rqia.org.uk](mailto:Estates.Mailbox@rqia.org.uk) 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 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 service.

## Quality Improvement Plan

### Statutory Requirements

<b>Requirement 1</b>	Submit verification that the BS7671 Periodic Inspection Report for the electrical installation is currently valid, that any recommended issues have been assessed and remedial action arranged.
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**Ref:** Regulations 14.1(a),(b) &(c)

**Stated:** First time

**To be Completed by:**  
**08 December 2015**

**Response by Registered Manager Detailing the Actions Taken:**  
See Certificates attached

### Requirement 2

**Ref:** Regulations 26.(4)(c) & (d)

**Stated:** First time

**To be Completed by:**  
**08 December 2015**

Submit verification that the emergency lighting and fire alarm systems have received maintenance engineer testing & inspection at intervals compliant with BS5266 and BS5839 respectively.

**Response by Registered Manager Detailing the Actions Taken:**  
See certificates attached

### Recommendations

#### Recommendation 1

**Ref:** Standard 25.7

**Stated:** First time

**To be Completed by:**  
**08 December 2015**

Verify that the space heating boiler is maintained in compliance with manufacturer's instructions.

**Response by Registered Manager Detailing the Actions Taken:**  
Serviced 16/10/15. Certificat attached

<b>Registered Manager Completing QIP</b>	Pat Mc Gurn	<b>Date Completed</b>	03/11/15
<b>Registered Person Approving QIP</b>	Pat Mc Gurn	<b>Date Approved</b>	03/11/15
<b>RQIA Inspector Assessing Response</b>	Raymond Sayers	<b>Date Approved</b>	14/12/15

*\*Please ensure the QIP is completed in full and returned to [Estates.Mailbox@rqia.org.uk](mailto:Estates.Mailbox@rqia.org.uk) from the authorised email address\**