

# Unannounced Premises Inspection Report

## 9 October 2018



## Mulhern Close

**Type of service: Residential Care Home**  
**Address: 58 Coolnagard Avenue, Omagh BT78 1GA**  
**Tel No: 028 82250382**  
**Inspector: Raymond Sayers**

[www.rgia.org.uk](http://www.rgia.org.uk)

Assurance, Challenge and Improvement in Health and Social Care

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 service from their responsibility for maintaining compliance with legislation, standards and best practice.

## 1.0 What we look for



## 2.0 Profile of service

This is a residential care home providing care for twelve residents, in detached Bungalows B,C & D. (four residents occupying each bungalow).

### 3.0 Service details

<b>Organisation/Registered Provider:</b> Inspire Disability services	<b>Registered Manager:</b> Oonagh Patrice Mulholland
<b>Person in charge at the time of inspection:</b> Oonagh Patrice Mulholland	<b>Number of registered places:</b> 12

### 4.0 Inspection summary

An unannounced inspection took place on 09 October 2018 from 16.10 to 16.45hrs. The inspection was continued the following morning 10 October 2018 from 11.15 to 13.15.

This inspection was underpinned by:

- The Residential Care Homes Regulations (Northern Ireland) 2005
- Department of Health, Social Services and Public Safety (DHSSPS) Residential Care Homes Minimum Standards (2011)

The purpose of the inspection was to investigate fire safety concerns reported by the RQIA care inspector during a care inspection on 9 October 2018 (ref IN031275).

The care inspector reported that there had been a fire alarm system failure, and that this incident had not been reported to RQIA.

This focussed inspection was arranged to establish that the service users within the care home were safe, and that effective fire safety control measures are implemented.

The following areas were examined during the inspection:

- Fire safety

The findings of this report will provide the registered manager with the necessary information to assist them to fulfil their responsibilities.

### 5.0 Inspection outcome

	Regulations	Standards
<b>Total number of areas for improvement</b>	2	0

Areas for improvement and details of the Quality Improvement Plan (QIP) were discussed with Oonagh Mulholland, Registered Manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

- Bungalow B fire alarm system malfunctioned on 8 July 2018, the BS5839 system in Bungalows A,C and D continues to operate however there was a subsequent

communications failure between the bungalows and the main fire alarm panel in Bungalow A. Fire detection & alarm system engineers were unable to repair the system, it was ascertained that it was now obsolete and a new fire alarm panel was required. Inspire Disability Services Health and Safety officer reviewed the health and safety risk assessment for the premises, and arranged for additional control measures to be implemented:

- Additional self-contained fire detection and alarm sensors are installed in Bungalow B as a temporary measure.
- Newly installed self-contained detectors are tested by building user/staff on a weekly basis.
- Night-time monitoring checks on residents are increased, 30 minute intervals resident checks implemented.
- Simulated night time evacuation of residents has been completed during fire drills.
- Team leader carries intercom deck-phone, and intercom system links communication between bungalows.
- The fire risk assessment report dated 19 October 2018 evaluates risk as `tolerable`, the risk assessor has attached a recommended action plan for implementation.
- The registered manager was informed that RQIA should have been notified of this specific fire alarm system malfunction through the incident notification procedure on the Web Portal. The Registered Manager stated that this issue would be implemented. A retrospective notification was submitted with regard to this specific incident.

## 6.0 Areas for improvement

Areas for improvement have been identified where action is required to ensure compliance with:

- The Residential Care Homes Regulations (Northern Ireland) 2005
- Department of Health, Social Services and Public Safety (DHSSPS) Residential Care Homes Minimum Standards (2011)

## 7.0 Actions to be taken by the service

The QIP should be completed and detail the actions taken to address the areas for improvement identified. The registered provider should confirm that these actions have been completed and return the completed QIP via Web Portal for assessment by the inspector.

Quality Improvement Plan	
Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005	
<b>Area for improvement 1</b>  <b>Ref:</b> Regulation 27.(4).(a)  <b>Stated:</b> First time  <b>To be completed by:</b> 2 November 2018	The registered person shall ensure that the 19 October 2019 facility fire risk assessment action plan requirements/recommendations are implemented.  Ref: 5.2
	<b>Response by registered person detailing the actions taken:</b> All recommendations made on 19.10.2018 have been implemented by the Acting Registered Manager as follows;  1. Fire alarm in bungalows C&D and Admin building are functioning 2. Fire detection certificates received on 19.10.2018 3. Installation certificate for the Part 6 temporary fire alarm system in Bungalow B received on 19.10.2018 4. Daily checklist to ensure scheme mobiles are fully charged in place 5. Fire Risk Assessment updated and issued to Mulhern Close on 22.10.2018 6. All incidents in Mulhern Close are recorded, reported to RQIA/WHSCCT as required, FRA to be updated following an incident as required 7. Fire Risk Assessor to follow up with Inspire with suggestions to update current fire evacuation instructions, this information has not been provided to Inspire as yet.
<b>Area for improvement 2</b>  <b>Ref:</b> Regulation 27.(4).(b),(c) & (d)  <b>Stated:</b> First time  <b>To be completed by:</b> 30 November 2018	The registered person shall ensure that the existing defective fire detection and alarm system is replaced with a new BS5839 Part 1 fully addressable fire alarm system.  Ref: 5.1
	<b>Response by registered person detailing the actions taken:</b> Admin building, and Bungalows B, C and D have all been fully fittled with a new BS5839 Part 1 fully addressable fire alarm system (L1 system). The installation work was completed on 31.10.2018.

*\*Please ensure this document is completed in full and returned via Web Portal\**





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