

Mindwise RQIA ID: 11130 3rd Floor Fisherwick Building 9 Upper Queen Street Belfast BT1 6FB

Inspector: Gavin Doherty

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Announced Estates Inspection of Mindwise Day Care

27 April 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 27 April 2015 from 10.30 to 12.00. Overall 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 actions 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	2	1

The details of the QIP within this report were discussed with Ms Karen Crothers, Registered Manager as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Manager:
Ms Karen Crothers
Date Manager Registered: 20 July 2009
Number of Registered Places:
20
Weekly Tariff at Time of Inspection:
Not Ascertained
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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 Estate's inspection report
- Statutory notifications received over the past 12 months.

During the inspection the inspector did not meet with any service users, care staff, visiting professionals or service users' representatives.

The following records were examined during the inspection:

- Fire Risk assessment
- Fire Safety service records and in-house log books
- Electrical Certificates & associated records.

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the service was an unannounced care inspection dated 24 April 2015. The completed QIP containing four recommendations, for this inspection will be returned and approved by the specialist inspector in due course.

5.2 Review of Requirements and Recommendations from the last Estates inspection

This is the first estates inspection for this service since it relocation to these premises. There are therefore no outstanding requirements or recommendations relating to these premises.

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 documentation in relation to the maintenance and upkeep 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.

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.

Is Care Compassionate? (Quality of Care)

The areas of the premises reviewed during this Estates inspection were well presented, clean and free from malodours. This supports the delivery of compassionate care. A number of issues were however identified for attention during this Estates inspection. These are detailed in the 'areas for improvement' section below.

Areas for Improvement

The toilet seat was missing on the ladies wc. The manager stated that they were currently sourcing a seat with more robust fittings as this was an ongoing issue. It was confirmed subsequent to the inspection that a suitable and robust toilet seat has now been fitted to this wc.

The toilets in the premises have no mechanical ventilation. This could lead to malodours forming if suitable natural ventilation cannot be maintained. It was agreed that the manager would arrange for the windows to be locked open on the 'snib' position, so as to provide continuous trickle ventilation to this area. This has been verified subsequent to the inspection.

Service users stated that on certain occasions there can be increased demand for the available toilets, leading to a queue forming. On such occasions, there is no reason why the accessible toilet cannot be used to assist the service users. Management have confirmed subsequent to the inspection that this information has been passed on to the service users.

Number of Requirements	0	Number Recommendations:	0	Ì
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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 documentation relating 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. One issue was however identified for attention during this Estates inspection. This is detailed in the 'areas for improvement' section below.

Is Care Effective? (Quality of Management)

The nature and needs of the residents 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.

Is Care Compassionate? (Quality of Care)

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

Areas for Improvement

The certificate for the premises fixed electrical installation was not available at the time of the inspection. The registered manager should liaise with the Landlord, and forward to RQIA, confirmation of the date for the most recent inspection and that the installation is in a 'satisfactory' condition.

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Number of Requirements	1	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.

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

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.

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

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.

Areas for Improvement

The certificate for the premises emergency lighting installation was not available at the time of the inspection. The registered manager should liaise with the Landlord, and forward to RQIA, confirmation of the date for the most recent inspection and that the installation is in a 'satisfactory' condition.

At times in the premises, fire doors may need to be held in the open position. It is essential if this is the case that such doors are fitted with a suitable hold open device which is linked to the centre's fire detection and alarm system.

Number of Requirements	1	Number Recommendations:	1	
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5.6 Additional Areas Examined

No additional areas were examined during this inspection.

6. Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Ms Karen Crothers, 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 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 will 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 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.

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	Quality	Improvement Plan			
	adding improvement idea				
Statutory Requirement	S				
Requirement 1	_	nanager should liaise with			
Def. Degulation 26(2)	RQIA, confirmation of the date for the most recent inspection for the				
Ref : Regulation 26(2)	fixed electrical installation and that the installation is in a 'satisfactory'				
Stated: First time	condition.				
	Response by Re	egistered Manager Detail	ling the Actions	Taken:	
To be Completed by:		al testing is booked for 5 th Jur			
20 July 2015					
Poquiromont 2	The registered =	anagar chauld liaiga with t	tha Landlard an	d forward to	
Requirement 2	_	nanager should liaise with to on of the date for the most			
Ref: Regulation 26(4)	*	ng installation and that the	•		
	'satisfactory' con	•		-	
Stated: First time	·				
	Response by Registered Manager Detailing the Actions Taken:				
To be Completed by:		nager met with the buildings		ested the	
20 July 2015	information. This should be with MIndWise by 26 th June.				
Recommendations					
Recommendation 1		fire door that is required to			
	-	en device which is linked to	the centre's fire	detection	
Ref: Standard 28	and alarm syster	n.			
Stated: First time	Response by Registered Manager Detailing the Actions Taken:				
Stated: 1 Hot tille	_	al company has been instruct	_		
To be Completed by:		xpected by 12 June 2015.	ca to in addi closs		
As required	completion date expected by 12 take 2015.				
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Registered Manager Co	ompleting QIP	Karen Crothers	Date Completed	3/6/2015	
Devictored Deve - A	was dim as OID	E1 10 :	Date	0/6/2017	
Registered Person App	oroving QIP	Edward Gorringe	Approved	9/6/2015	
RQIA Inspector Assessing Response Gavin Doherty Date 24/9/2			24/9/2015*		
	g response	Cavili Dollorty	Approved	2 1/3/2010	

Please ensure the QIP is completed in full and returned to estates.mailbox@rqia.org.uk from the authorised email address

^{*}Clarification or follow up required on some items.