

# Announced Premises Inspection Report 21 March 2017



## Manor Court Day Centre

**Type of Service: Day Care Setting**  
**Address: Sloan Street, Lurgan BT66 8RN**  
**Tel No: 02838329586**  
**Inspector: Raymond Sayers**

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Assurance, Challenge and Improvement in Health and Social Care

## 1.0 Summary

An announced premises inspection of Manor Court Day Centre took place on 21 March 2017 from 10:10 to 12:00.

The inspection sought to assess progress with any issues raised during and since the last premises inspection and to determine if the day care setting was well led, delivering safe, effective and compassionate care.

### Is care safe?

On the day of the inspection the premises supported the delivery of safe care. Refer to section 4.3.

### Is care effective?

On the day of the inspection the premises supported the delivery of effective care. Refer to section 4.4.

### Is care compassionate?

On the day of the inspection the premises supported the delivery of compassionate care. Refer to section 4.5.

### Is the service well led?

On the day of the inspection the management of the premises was considered to be well led. Refer to section 4.6.

This inspection was underpinned by The Day Care Setting Regulations (Northern Ireland) 2007 and The Day Care Settings Minimum Standards (DHSSPS, 2012).

## 1.1 Inspection outcome

	Requirements	Recommendations
<b>Total number of requirements and recommendations made at this inspection</b>	0	0

This inspection resulted in no requirements or recommendations being made. Findings of the inspection were discussed with, Carol McCoy, Manager, as part of the inspection process and can be found in the main body of the report.

There was no enforcement action implemented resultant from the findings of this inspection.

## 1.2 Actions/enforcement taken following the most recent premises inspection

There were no further actions required to be taken following the most recent inspection.

## 2.0 Service Details

<b>Registered organisation/registered provider:</b> Fold Housing Association/Fiona McAnespie	<b>Registered manager:</b> Carol McCoy
<b>Person in charge of the establishment at the time of inspection:</b> Carol McCoy	<b>Date manager registered:</b> 15 April 2017
<b>Categories of care:</b> DCS-DE, DCS-I	<b>Number of registered places:</b> 10

## 3.0 Methods/processes

Prior to inspection the following records were analysed:

- Previous premises inspection report
- Statutory notifications over the past 12 months
- Concerns call log

During the inspection the inspector met two service users, kitchen staff, and Carol McCoy, Registered Manager.

The following records were examined during the inspection:

- Copies of building services maintenance certificates
- Building user log books relating to the maintenance and inspection of the building and engineering services
- Legionellae risk assessment
- Fire risk assessment

## 4.0 The inspection

### 4.1 Review of requirements and recommendations from the most recent inspection dated 5 July 2016

The most recent inspection of the day care setting was an unannounced care inspection. The completed QIP was returned and approved by the care inspector. This QIP will be validated by the specialist inspector at their next inspection.

## 4.2 Review of requirements and recommendations from the last premises inspection dated 11 March 2014

Last care inspection statutory requirements		Validation of compliance
<b>Requirement 1</b>  <b>Ref:</b> Regulation 14(1)(a),(b) & (c)  <b>Stated:</b> First time	Submit verification that the BS7671 Periodic Inspection Report for the electrical installation has been assessed and that a prioritized works action plan has been drafted for implementation, ensuring that the electrical installation is compliant with the Electricity at Work Regulations.  (Reference: Report section 9.3.2)	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Verification implemented, and current BS7671 Periodic Inspection & Test in progress during premises inspection.	
<b>Requirement 2</b>  <b>Ref:</b> Standard 14(1)(a),(b) & (c)  <b>Stated:</b> First time	Liaise with Southern Health & Social Care Trust representatives and verify that the mobile hoist appliance is compliant with the Lifting Operations and Lifting Equipment Regulations (LOLER), and that routine thorough examinations and maintenance works are implemented.  (Reference: Report section 9.3.3)	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Implemented; no longer applicable as there are no trust lifting appliances on site.	
<b>Requirement 3</b>  <b>Ref:</b> Standard 26(4)(a)  <b>Stated:</b> First time	Review the fire risk assessment and ensure that the day care service users are included in the risk assessor's appraisal report.  (Reference: Report section 9.4.2)	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Implemented.	

#### 4.3 Is care safe?

A range of documents related to the maintenance 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.

An electrical engineer was undertaking a BS7671 Periodic Inspection of the electrical installation during the premises inspection; upon receipt by facility manager the subsequent report will be forwarded to the RQIA Estates Inspector.

There were no issues requiring improvement were identified during the inspection.

<b>Number of requirements</b>	<b>0</b>	<b>Number of recommendations:</b>	<b>0</b>
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#### 4.4 Is care effective?

There are arrangements in place for routine premises management, as well as timely emergency/repair maintenance. Service users are involved where appropriate in decisions around maintenance in the premises.

This supports the delivery of effective care.

A general refurbishment is to be completed during 2017/18 financial year.

No areas for improvement were identified during the inspection.

<b>Number of requirements</b>	<b>0</b>	<b>Number of recommendations:</b>	<b>0</b>
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#### 4.5 Is care compassionate?

The accommodation reviewed during this premises inspection was well presented, comfortable, clean, well ventilated, with adequate lighting levels.

Service users are consulted about decisions around decoration, where appropriate.

This supports the delivery of compassionate care.

There were no issues requiring improvement identified during the inspection.

<b>Number of requirements</b>	<b>0</b>	<b>Number of recommendations:</b>	<b>0</b>
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#### 4.6 Is the service well led?

Premises related policies and documents are retained in a manner accessible to authorised persons.

Arrangements are in place for managing premises related incidents/notifiable events, and Medical Device and Equipment Alerts.

The registered person has implemented previous RQIA QIP items and other relevant issues relating to the premises. Adequate support and resources are provided by the registered responsible person.

There are appropriate relationships with maintenance personnel, specialist contractors and statutory regulators.

This supports a well led service.

There were no issues requiring improvement identified during the inspection.

<b>Number of requirements</b>	<b>0</b>	<b>Number of recommendations:</b>	<b>0</b>
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#### 5.0 Quality improvement plan

There were no issues identified during this inspection, and a QIP is neither required, nor included, as part of this inspection report.

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.



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