



The Regulation and
Quality Improvement
Authority

Drumross Adult Centre
RQIA ID: 11184
O'Neill Road
Newtownabbey
BT36 6UN

Inspector: Gavin Doherty
Inspection ID: IN021568

Tel: 028 9084 9632
Email:

natalie.jackson@northerntrust.hscni.net

**Announced Estates Inspection
of
Drumross Adult Centre incorporating 'New Ways'**

11 January 2016

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 11 January 2016 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;

- 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	0	0

This inspection resulted in no requirements or recommendations being made. Findings of the inspection can be found in the main body of the report.

2. Service Details

Registered Organisation/Registered Person: Northern HSC Trust / Mr Tony Stevens	Registered Manager: Ms Natalie Jackson
Person in Charge of the Premises at the Time of Inspection: Ms Natalie Jackson	Date Manager Registered: 17 August 2010
Categories of Care: DCS-LD, DCS-LD(E)	Number of Registered Places: 110
Number of Service Users Accommodated on Day of Inspection: Not ascertained	Weekly Tariff at Time of Inspection: Not ascertained

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 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 months.

Discussions with Ms Natalie Jackson, Manager and Mr Ian Scott, Estates.

The following records were examined during the inspection: Service records and in-house log books relating to the maintenance and upkeep of the building and engineering services, legionellae risk assessment, and fire risk assessment.

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 22 September 2015. The completed QIP was returned and approved by the care inspector on 12 November 2015.

5.2 Review of Requirements and Recommendations from *the last* Estates Inspection undertaken on 26 June 2012.

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulation 26	Clean the external patio area to provide a suitable slip resistant surface for service users, and complete the agreed soft play area (including associated fixed play equipment) without further delay.	Met
	Action taken as confirmed during the inspection: Inspector confirmed at the time of inspection.	

Requirement 2 Ref: Regulation 14	Ensure that the remedial works and control measures flowing from the Legionella risk assessment (dated 22 April 2011), are completed and implemented without further delay.	Met
Action taken as confirmed during the inspection: Inspector confirmed at the time of inspection.		
Requirement 3 Ref: Regulation 14	Ensure that the damaged laminate surfaces to the toilet cubicles and dining tables observed during the inspection is repaired or replaced in accordance with current infection control best practice.	Met
Action taken as confirmed during the inspection: Inspector confirmed at the time of inspection.		
Requirement 4 Ref: Regulation 14	Ensure that all patient lifting equipment receives suitable and sufficient 'thorough examination' in accordance with the 'Lifting operations lifting equipment regulations' issued by the Health and Safety Executive.	Met
Action taken as confirmed during the inspection: Copies of the latest LOLER examinations were forwarded to RQIA by email on 12 January 2015.		
Requirement 5 Ref: Regulation 26	Ensure that the significant fire code upgrade works, identified in the Centre's fire risk assessment as due to be completed within this financial year, are indeed fully implemented within this timescale.	Met
Action taken as confirmed during the inspection: Inspector confirmed at the time of inspection.		

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.

Areas for Improvement

No areas for improvement were identified as a result of this inspection.

Number of Requirements	0	Number Recommendations:	0
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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.

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 premises. This supports the delivery of effective care.

Is Care Compassionate? (Quality of Care)

There are health & safety procedures and control measures in place which support the delivery of compassionate care. The certification for the 'thorough examination' of the service user lifting equipment within the premises was unavailable for inspection. However satisfactory details were subsequently provided to RQIA on 12 January 2016 by the Trust's Estate department.

Areas for Improvement

No areas for improvement were identified as a result of this inspection.

Number of Requirements	0	Number Recommendations:	0
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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.

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.

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

No areas for improvement were identified as a result of this inspection.

Number of Requirements	0	Number Recommendations:	0
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5.6 Additional Areas Examined

No additional areas were examined during this estates inspection.

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 home. 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.

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.

Registered Manager	Natalie Jackson	Date Completed	29/01/16
Registered Person	Tony Stevens	Date Approved	01/02/16
RQIA Inspector Assessing Response	Gavin.Doherty	Date Approved	02/02/16

Please provide any additional comments or observations you may wish to make below:

Please complete in full and returned to RQIA from the authorised email address