

# Announced Premises Inspection Report 25 October 2016



## Glenside Adult Training Centre

**Type of Service: Day Care Setting**  
**Address: 24A Derry Road, Strabane, BT82 8DY**  
**Tel No: 028 7138 2950**  
**Inspector: Gavin Doherty**

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

Assurance, Challenge and Improvement in Health and Social Care

## 1.0 Summary

An announced premises inspection of Glenside Adult Training Centre took place on 25 October 2016 from 11:00 to 12:30.

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 delivering safe, effective and compassionate care and if the service was well led.

### Is care safe?

On the day of the inspection the premises supported the delivery of safe care. However two issues were identified for attention by the registered provider. Refer to section 4.3

### Is care effective?

On the day of the inspection the premises supported the delivery of effective care. However one issue was identified for attention by the registered provider. Refer to section 4.4

### Is care compassionate?

On the day of the inspection the premises supported the delivery of compassionate care.

### Is the service well led?

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

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>	2	4

Details of the Quality Improvement Plan (QIP) within this report were discussed with Mrs Oonah Cassidy, Registered Manager and Mrs Victoria Young, Senior Day Care Worker, as part of the inspection process. The timescales for completion commence from the date of inspection.

Enforcement action did not result from the findings of this inspection.

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

Other than those actions detailed in the previous QIP there were no further actions required to be taken following the most recent premises inspection.

## 2.0 Service Details

<b>Registered organisation/registered provider:</b> Western HSC Trust/Mrs Elaine Way CBE	<b>Registered manager:</b> Mrs Oonah Cassidy
<b>Person in charge of the establishment at the time of inspection:</b> Mrs Oonah Cassidy	<b>Date manager registered:</b> 27 September 2010
<b>Categories of care:</b> DCS-LD, DCS-LD(E)	<b>Number of registered places:</b> 55

## 3.0 Methods/processes

Prior to inspection the following records were analysed: Previous premises inspection report, statutory notifications over the past 12 months, duty call log.

During the inspection the inspector met with Mrs Oonah Cassidy, Registered Manager and Mrs Victoria Young, Senior Day Care Worker.

The following records were examined during the inspection: Copies of 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.

## 4.0 The inspection

### 4.1 Review of requirements and recommendations from the most recent inspection dated 02/06/16

The most recent inspection of the day care setting was an unannounced care inspection. The completed QIP was issued by the specialist inspector on 30 June 2016. 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 28/01/14

Last premises inspection statutory requirements		Validation of compliance
<b>Requirement 1</b> <b>Ref:</b> Regulation 26 (2)(a) <b>Stated:</b> First time	The Centre's timber fascia and soffits are in very poor condition and should be made good and redecorated.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Inspector confirmed that this work had been undertaken at the time of inspection.	
<b>Requirement 2</b> <b>Ref:</b> Regulation 26 (2)(b) <b>Stated:</b> First time	Ensure that all external paths and surfaces are kept free of fallen leaves, moss, debris etc. and are maintained in a slip resistant condition at all times.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Inspector confirmed that this work had been undertaken at the time of inspection.	
<b>Requirement 3</b> <b>Ref:</b> Regulation 26 (2)(b) <b>Stated:</b> First time	Ensure that the Centre's roof tiles are cleared of moss and algae.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Inspector confirmed that this work had been undertaken at the time of inspection.	
<b>Requirement 4</b> <b>Ref:</b> Regulation 26 (2)(a) <b>Stated:</b> First time	Survey the external ramps serving the Centre and provide suitable handrails and guarding as required. With regards to the ramp to the existing poly-tunnels at the rear of the Centre the provision of steps may be more appropriate.	<b>Not Met</b>
	<b>Action taken as confirmed during the inspection:</b> Inspector confirmed that no further action had been taken at the time of inspection. This requirement is restated. Refer to requirement 1 in the attached Quality Improvement Plan.	

<b>Requirement 5</b>  <b>Ref:</b> Regulation 26 (2)(f)  <b>Stated:</b> First time	Ensure sufficient and appropriate seating is provided in all areas of the Centre, for the service users and staff.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Inspector confirmed that this work had been undertaken at the time of inspection.	
<b>Requirement 6</b>  <b>Ref:</b> Regulation 26 (2)(f)  <b>Stated:</b> First time	Ensure that all damaged seating throughout the Centre is identified, and is recovered or replaced without further delay.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Inspector confirmed that this work had been undertaken at the time of inspection.	
<b>Requirement 7</b>  <b>Ref:</b> Regulation 26 (2)(b)  <b>Stated:</b> First time	Remove the defective paint finish from all the internal doors throughout the Centre and repainted accordingly.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Inspector confirmed that this work had been undertaken at the time of inspection.	
<b>Requirement 8</b>  <b>Ref:</b> Regulation 14 (1)(a)(c) 26 (2)(j)  <b>Stated:</b> First time	Install a suitable and sufficient emergency call system within the Centre to enable staff and service users at remote areas of the Centre to call for assistance if and when required. The recently relocated Snozallen room and the Intensive Support Unit gave particular cause for concern.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Inspector confirmed that this work had been undertaken at the time of inspection.	
<b>Requirement 9</b>  <b>Ref:</b> Regulation 14 (1)(a)(c) 26 (2)(l)  <b>Stated:</b> First time	Ensure the cold water storage tank is cleaned in accordance with the requirement made in the current legionella risk assessment.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Inspector confirmed that this work had been undertaken at the time of inspection.	

Last premises inspection recommendations		Validation of compliance
<b>Recommendation 1</b>  <b>Ref:</b> Standard 25.7  <b>Stated:</b> First time	Assess the current layout of the bathroom/ disabled wc/personal care laundry room and suitably reconfigure this room to best meet the current needs of the service users. It is essential that careful consideration is given to current infection control best practice and the Trust's infection control team should be involved in agreeing any proposed changes.	<b>Not Met</b>
	<b>Action taken as confirmed during the inspection:</b> Inspector confirmed that no further action had been taken at the time of inspection. This requirement is restated. Refer to recommendation 1 in the attached Quality Improvement Plan.	
<b>Recommendation 2</b>  <b>Ref:</b> Standard 25.7  <b>Stated:</b> First time	Remove the partition wall between the store and the existing activity space in the Intensive Support Unit. This will create valuable additional space which would much better serve the intensive needs of the service users in this area of the Centre.	<b>Not Met</b>
	<b>Action taken as confirmed during the inspection:</b> Inspector confirmed that no further action had been taken at the time of inspection. This requirement is restated. Refer to recommendation 2 in the attached Quality Improvement Plan.	

#### 4.3 Is care safe?

A range of documentation in relation to the maintenance and upkeep 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.

Two issues were however identified for attention during this premises inspection. These are detailed in the 'areas for improvement' section below.

### Areas for improvement

1. The floor finish in the Kitchen Dry goods store was in poor condition. This floor finish should be made good or replaced with suitable slip resistant flooring.  
(Requirement 2 in the attached Quality Improvement Plan)
2. Kitchen staff were concerned that the existing quarry tile floor finish in the kitchen offered little slip resistance when wet or damp with condensation. It is important that a suitable risk assessment is undertaken with regards to this existing floor finish and that suitable action is taken to reduce or remove any identified risk.  
(Recommendation 3 in the attached Quality Improvement Plan)

<b>Number of requirements</b>	<b>1</b>	<b>Number of recommendations:</b>	<b>1</b>
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#### 4.4 Is care effective?

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

This supports the delivery of effective care.

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

### Areas for improvement

1. The external cladding of the 'Intensive Support Unit' sectional building was in very poor condition. Suitable remedial works should be undertaken to replace this damaged cladding, and to redecorate this building in a timely manner.  
(Recommendation 4 in the attached Quality Improvement Plan)

<b>Number of requirements</b>	<b>0</b>	<b>Number of recommendations:</b>	<b>1</b>
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#### 4.5 Is care compassionate?

The areas of the premises reviewed during this premises inspection were well presented, comfortable, clean, free from malodours and adequately lit. Service users are consulted about decisions around décor where appropriate.

This supports the delivery of compassionate care.

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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#### 4.6 Is the service well led?

Premises related policies and documentation are retained in a manner which is accessible to relevant people.

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

The registered person has dealt appropriately with previous RQIA QIP items and other relevant issues relating to the premises and has been adequately supported and resourced by the registered responsible person.

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

This supports a well led service.

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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#### 5.0 Quality improvement plan

Any issues identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Mrs Oonah Cassidy, Registered Manager and Mrs Victoria Young, Senior Day Care Worker as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/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 provider 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 the day care setting. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises, RQIA would apply standards current at the time of that application.

#### 5.1 Statutory requirements

This section outlines the actions which must be taken so that the registered person/manager meets legislative requirements based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Day Care Setting Regulations (Northern Ireland) 2007



## 5.2 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.

## 5.3 Actions taken by the Registered Provider

The QIP should be completed and detail the actions taken to meet the legislative requirements stated. The registered provider should confirm that these actions have been completed and return completed QIP to [Estates.Mailbox@rqia.org.uk](mailto:Estates.Mailbox@rqia.org.uk) for review by the inspector.

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. It is expected that the requirements and recommendations outlined in this report will provide the registered provider with the necessary information to assist them to fulfil their responsibilities and enhance practice within the service.

Quality Improvement Plan	
Statutory requirements	
<b>Requirement 1</b>  <b>Ref:</b> Regulation 26(2)  <b>Stated:</b> Second time  <b>To be completed by:</b> 17 January 2017	Survey the external ramps serving the Centre and provide suitable handrails and guarding as required. With regards to the ramp to the existing poly-tunnels at the rear of the Centre the provision of steps may be more appropriate.
	<b>Response by registered provider detailing the actions taken:</b> Minor Capital work form submitted to line manager December 6 <sup>th</sup> 2016 for this work to be done. Request will be added to minor capital works list.  An estates condition survey has been completed for the Glenside Centre by the Trust and work is ongoing to secure longer term improvement through submission of a business case to agree funds for future development.
<b>Requirement 2</b>  <b>Ref:</b> Regulation 26(2)  <b>Stated:</b> First time  <b>To be completed by:</b> 17 January 2017	The floor finish in the Kitchen dry goods store was in poor condition. This floor finish should be made good or replaced with suitable slip resistant flooring.
	<b>Response by registered provider detailing the actions taken:</b> Forwarded requirement information to support services coordinator by e mail December 6 <sup>th</sup> 2016 . Minor capital work form forwarded to line manager December 6 <sup>th</sup> 2016 for this work to be done. Request will be added to minor capital work list  An estates condition survey has been completed for the Glenside Centre by the Trust and work is ongoing to secure longer term improvement through submission of a business case to agree funds for future development.
Recommendations	
<b>Recommendation 1</b>  <b>Ref:</b> Standard 25.5  <b>Stated:</b> Second time  <b>To be completed by:</b> 17 January 2017	Assess the current layout of the bathroom/ disabled wc/personal care laundry room and suitably reconfigure this room to best meet the current needs of the service users. It is essential that careful consideration is given to current infection control best practice and the Trust's infection control team should be involved in agreeing any proposed changes.
	<b>Response by registered provider detailing the actions taken:</b> Minor capital work form forwarded to line manager December 6 <sup>th</sup> 2016 for this work to be done. This will be added to minor capital work list and is of high priority.

<p><b>Recommendation 2</b></p> <p><b>Ref:</b> Standard 25</p> <p><b>Stated:</b> Second time</p> <p><b>To be completed by:</b> 17 January 2017</p>	<p>Remove the partition wall between the store and the existing activity space in the Intensive Support Unit. This will create valuable additional space which would much better serve the intensive needs of the service users in this area of the Centre.</p> <p><b>Response by registered provider detailing the actions taken:</b> Minor capital work form forwarded to line manager December 6<sup>th</sup> 2016 for this work to be done. This will be added to minor capital work list</p>
<p><b>Recommendation 3</b></p> <p><b>Ref:</b> Standard 25.7</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 17 January 2017</p>	<p>Kitchen staff were concerned that the existing quarry tile floor finish in the kitchen offered little slip resistance when wet or damp with condensation. It is important that a suitable risk assessment is undertaken with regards to this existing floor finish and that suitable action is taken to reduce or remove any identified risk.</p> <p><b>Response by registered provider detailing the actions taken:</b> Forwarded recommendation information to support services coordinator by e mail December 6<sup>th</sup> 2016 for risk assessment to be completed. Forwarded minor capital work form to line manager December 6<sup>th</sup> 2016 for this work to be done. This will be added to minor capital work list</p> <p>An estates condition survey has been completed for the Glenside Centre by the Trust and work is ongoing to secure longer term improvement through submission of a business case to agree funds for future development..</p>
<p><b>Recommendation 4</b></p> <p><b>Ref:</b> Standard 25.1</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 17 January 2017</p>	<p>The external cladding of the 'Intensive Support Unit' sectional building was in very poor condition. Suitable remedial works should be undertaken to replace this damaged cladding, and to redecorate this building in a timely manner.</p> <p><b>Response by registered provider detailing the actions taken:</b> Minor capital work form forwarded to line manager December 6<sup>th</sup> 2016 for this work to be done. This will be added to the minor capital work list.</p> <p>It should be noted that an Estates Condition Survey has been carried out by the Western Health and Social Care Trust regarding Glenside Centre. There is currently a business case prepared to secure capital investment to achieve improvement to the Intensive Support Unit to address external and internal requirements on an interim basis. We are hopeful of a positive response to allow this work to progress in 2017. There is also a longer term plan to progress work to develop appropriate day care accomodation for the area based on the needs of servcie users and to upgrade current provision.</p>

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



The Regulation and Quality Improvement Authority  
9th Floor  
Riverside Tower  
5 Lanyon Place  
BELFAST  
BT1 3BT

Tel 028 9051 7500  
Fax 028 9051 7501  
Email [info@rqia.org.uk](mailto:info@rqia.org.uk)  
Web [www.rqia.org.uk](http://www.rqia.org.uk)  
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