

Announced Premises Inspection Report 12 January 2017



Tempo Road Day Centre

Type of Service: Day Care Setting
Address: 42a Tempo Road, Enniskillen, BT74 6HR
Tel No: 028 6632 28729
Inspector: Raymond Sayers

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Assurance, Challenge and Improvement in Health and Social Care

1.0 Summary

An announced premises inspection of Tempo Road Day Centre took place on 12 January 2017 from 14:00 to 15:30 hours.

The inspection sought to assess progress with any issues raised during and since the last premises inspection, 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. Some issues were however 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. 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
Total number of requirements and recommendations made at this inspection	0	3

Details of the Quality Improvement Plan (QIP) within this report were discussed with Ms Denise Foster, Registered Manager, and Mr Gerry Marshall, Western HSC Trust Estate Officer, as part of the inspection process. The timescales for completion commence from the date of inspection.

There was no enforcement action implemented as a result of the findings of this inspection.

1.2 Actions/enforcement taken following the most recent premises inspection

Other than those items detailed in the previous QIP there were no further actions required to be taken following the most recent premises inspection dated 16 December 2014.

2.0 Service Details

Registered organisation/registered provider: Western HSC Trust/Mrs Elaine Way CBE	Registered manager: Ms Denise Foster
Person in charge of the establishment at the time of inspection: Ms Denise Foster	Date manager registered: 24/08/2016
Categories of care: DCS-I, DCS-MP(E), DCS-DE	Number of registered places: 30

3.0 Methods/processes

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

During the inspection the inspector met with Ms Denise Foster, two service users, kitchen staff, and Mr Gerry Marshall, Western HSC Trust Estate Inspector.

The following records were examined during the inspection: Copies of building services maintenance/inspection certificates, building user log books relating to the maintenance and inspection 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 15 December 2016

The most recent inspection of the day care setting was an unannounced care inspection, IN026732, dated 15 December 2016. The completed QIP has not yet been returned for review by the care inspector. This QIP will be validated by the care inspector at their next inspection

4.2 Review of requirements and recommendations from the last premises inspection dated 16 December 2014

Last care inspection recommendations		Validation of compliance
Recommendation 1 Ref: Standard 25.1 Stated: First time	Complete a condition survey of all exterior timberwork, remove and replace rot affected timber and apply protective paint coating to all exterior paintwork.	Met
	Action taken as confirmed during the inspection: Repair works implemented.	

4.3 Is care safe?

A range of documents related to the maintenance and inspection 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 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.

A number of issues were however identified for attention during this premises inspection, and are detailed in the 'areas for improvement' section below.

Areas for improvement

1. The fire alarm system is scheduled for replacement within fourteen days of this inspection date.
Refer to Quality Improvement Plan Recommendation 1.
2. Engineers were on site completing the BS7671 periodic inspection report for the electrical installation, whilst the premises inspection was being completed.
Refer to Quality Improvement Plan Recommendation 2.
3. The legionella risk assessment was completed on 19 September 2016; the report had now been received by the Western HSC Trust Estate Department, and arrangements are being made to have the action plan implemented.
Refer to Quality Improvement Plan Recommendation 3.

Number of requirements	0	Number of recommendations:	3
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4.4 Is care effective?

There are arrangements in place for routine premises maintenance management, and timely breakdown/repair maintenance. Service users are involved in decisions around the maintenance of the premises, where appropriate. This supports the delivery of effective care.

There were no issues requiring improvement identified during the inspection.

Number of requirements	0	Number of recommendations:	0
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4.5 Is care compassionate?

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

Service users are consulted about decisions around décor where appropriate. This supports the delivery of compassionate care.

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

Number of requirements	0	Number of recommendations:	0
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4.6 Is the service well led?

Premises related policies and documents are retained in a manner which is 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 dealt appropriately with 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 other statutory regulators. This supports a well led service.

There were no issues requiring improvement identified during the inspection.

Number of requirements	0	Number of recommendations:	0
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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 Ms Denise Foster, Registered Manager, and Mr Gerry Marshall, Western HC Trust Estate Officer, 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 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	
Recommendations	
Recommendation 1 Ref: Standard 28.2 Stated: First time To be completed by: 06 March 2017	Submit a copy of the BS5839 fire panel installation and commissioning certificate for RQIA Estate Inspector examination.
	Response by registered provider detailing the actions taken: MR GERRY MARSHALL ESTATES OFFICER WILL FORWARD THE REQUIRED CERTIFICATE DIRECTLY TO RQIA INSPECTOR MR RAYMOND SAWYERS WHEN RECEIVED
Recommendation 2 Ref: Standard 27.1 Stated: First time To be completed by: 06 March 2017	Submit a copy of the BS7671 Periodic Inspection certificate for the electrical installation, for RQIA Estate Inspector examination.
	Response by registered provider detailing the actions taken: COPY OF REQUESTED CERTIFICATES HAVE BEEN FORWARDED TO RQIA INSPECTOR MR RAYMOND SAWYERS ON 20/01/2017
Recommendation 3 Ref: Standard 27.1 Stated: First time To be completed by: 06 March 2016	Arrange for implementation of the legionella risk assessment recommended works action plan.
	Response by registered provider detailing the actions taken: REQUEST FOR WORK TO BE CARRIED OUT BY TRUST ESTATES STAFF AS RECOMMENDED ON WORKS ACTION PLAN HAS BEEN FORWARDED BY MR GERRY MARSHALL ESTATES OFFICER

Please ensure this document is completed in full and returned to Estates.Mailbox@rqia.org.uk from the authorised email address



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