

**Variation Estates Inspection
of
Hawthorns Adult Centre Satellite Unit**

21 May 2015

1.0 General Information

Name of Establishment:	Hawthorns Adult Centre
Address of Establishment:	48 – 50 Irish Quarter West, Carrickfergus. BT38 7AT
Telephone Number:	028 9331 5110
Responsible Person / Person-in-Control:	Dr A Stevens
Manager:	Mr Marc Carey
Estates Officer:	Colin Muldoon
Date of Inspection:	21 May 2015

2.0 Introduction

This inspection was carried out to the proposed satellite premises associated with Hawthorns Adult Centre to assess compliance with The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Day Care Setting Regulations (Northern Ireland) 2007 and the Day Care Settings Minimum Care Standards 2012 with particular attention to:

Standard 25 – Premises and Grounds

Standard 27 – Safe and Healthy Working Practices

Standard 28 – Fire Safety

On the day of inspection the inspector met with the Manager, Mr Marc Carey and Ms Natalie Jackson (Day Care Locality Manager, Northern HSC Trust).

3.0 General

The premises proposed for the use of the Hawthorns satellite unit is a modern two storey commercial building close to the centre of Carrickfergus. Accommodation includes two large rooms on each floor, toilet facilities on each floor and kitchen facilities. In addition to the stairs there is a lift to facilitate movement between floors.

On the day of inspection it could not be confirmed that planning approval had been obtained for the building and its proposed use.

Also not available was a current LOLER (Lifting Operations and Lifting Equipment Regulations (NI) 1999) thorough examination report to confirm that the lift is currently without defects.

A condition report dated August 2014 deemed the electrical installation to be in satisfactory condition but did identify some issues including a category C2 matter (urgent remedial action required). It could not be confirmed if this issue has been addressed.

The room on the first floor to be used for the kitchen is totally enclosed and consideration should be given to the provision of suitable ventilation.

There is also an enclosed room on the ground floor and it is recommended that consideration be given to converting this space into additional toilet facilities.

There is a carpet type of floor covering throughout and in places it required to be repaired and secured. It is also recommended that in the kitchen the floor covering is replaced with a washable slip resistant sheet material.

There is no main landline telephone installed.

Fire Safety

On the day of inspection there was no fire risk assessment available although it is understood that the Trust fire safety officer has surveyed the building.

The inspector was given a copy of a service report on the fire alarm system. However, it could not be confirmed if the alarm and emergency lighting installations are in line with the relevant British Standard.

One of the emergency exit doors requires to be fitted with an easy opening device.

The layout of the building and its proposed use may give rise to the possibility that fire doors could be wedged open for operational reasons. The advice of the fire safety officer should be sought regarding the fitting of suitable door hold open devices linked to the fire detection and alarm system.

Daily and emergency fire safety procedures specific to the building should be established and staff trained and drilled in their implementation.

Health and Safety

A water safety/legionellae risk assessment was not available on the day of inspection and it could not be confirmed if the water outlets accessible to service users have thermostatic controls which have been set in accordance with NHS good practice.

The building is fitted with standard steel radiators. The risk from hot surfaces requires to be assessed and the necessary action taken.

The opening windows are fitted with a type of restrictor which can be disengaged and blinds with untethered loop cords.

Reference should be made to the Quality Improvement Plan for the specific details of these issues.

4.0 **Quality Improvement Plan**

The issues contained in the Quality Improvement Plan appended to this report were discussed with Mr Marc Carey as part of the inspection process.

The timescales commence from the date of inspection.

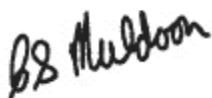
Requirements are based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 and The Day Care Setting Regulations (Northern Ireland) 2007 and must be met.

The Responsible Person/Person-in-Control is required to record comments on the Quality Improvement Plan.

5.0 **Enquiries**

Enquiries relating to this report should be addressed to:

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



Colin Muldoon
Estates Officer

19 June 2015

Date

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 premises. 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 day care setting.

Quality Improvement Plan	
Statutory Requirements	
Requirement 1 Ref: Regulation 26.-(1) Stated: First time To be Completed: Before registration	<p>Evidence that the planning authority find the building and its proposed use acceptable should be forwarded to RQIA.</p> <p>Response by Registered Manager Detailing the Actions Taken: Document attached.</p>
Requirement 2 Ref: Regulation 26.-(2)(c) and (l) Stated: First time To be Completed: Before registration	<p>It should be confirmed that there is a current LOLER thorough examination report for the lift. The report should verify that the lift is without defects.</p> <p>Response by Registered Manager Detailing the Actions Taken: NHSCT has confirmed today 8/7/2015 with Lift insurers Bureau Veritas re adding Lift to contract schedule. Simon Kyle-Ewing of Bureau Veritas to confirm date of lift inspection in compliance with LOLER NHSCT has confirmed today 8/7/2015 with Lift ppm subcontractor Kone re adding lift to contract schedule</p>
Requirement 3 Ref: Regulation 26.-(2)(l) Stated: First time To be Completed: Before registration	<p>It should be confirmed that the C2 issue identified in the electrical installation condition report has been addressed.</p> <p>Response by Registered Manager Detailing the Actions Taken: C2 item - No isolator for boiler to be addressed expected completion date 31/7/2015</p>
Requirement 4 Ref: Regulation 26.-(2)(b) Stated: First time To be Completed: Before registration	<p>The floor covering should be repaired and secured.</p> <p>Response by Registered Manager Detailing the Actions Taken: The carpeted flooring surfaces that were loose have now been made good.</p>

<p>Requirement 5</p> <p>Ref: Regulation 26.-(4)(b)</p> <p>Stated: First time</p> <p>To be Completed: Before registration</p>	<p>A dedicated telephone should be available at all times for staff to make emergency calls.</p> <p>Response by Registered Manager Detailing the Actions Taken: A request has been sent to our estates department to action this.</p>
<p>Requirement 6</p> <p>Ref: Regulation 13.-(7)</p> <p>Stated: First time</p> <p>To be Completed: Before registration</p>	<p>A water safety/legionella risk assessment should be carried out by a competent person and arrangements made to implement an ongoing scheme of legionella control and to address any remedial work identified.</p> <p>Response by Registered Manager Detailing the Actions Taken: LRA carried out by CTS on 5/6/2015</p>
<p>Requirement 7</p> <p>Ref: Regulation 14.-(1)(a) and (c)</p> <p>Stated: First time</p> <p>To be Completed: Before registration</p>	<p>It should be confirmed that the water outlets accessible to service users are fitted with suitable thermostatic mixing valves which have been serviced and set in accordance with the manufacturer's instructions and Health Guidance Note 'Safe' hot water and surface temperatures.</p> <p>Response by Registered Manager Detailing the Actions Taken: TMV 3 valves have been installed to plumbing installation and commissioned in accordance with Health care doc Commissioning TMV3</p>
<p>Requirement 8</p> <p>Ref: Regulation 14.-(1)(a) and (c)</p> <p>Stated: First time</p> <p>To be Completed: Before registration</p>	<p>A risk assessment should be carried out in relation to hot surfaces in the premises.</p> <p>Response by Registered Manager Detailing the Actions Taken: Exposed LTHW pipes drops in corner of rooms are having pipe insulation fitted. Expected completion date 10/7/2015</p>
<p>Requirement 9</p> <p>Ref: Regulation 14.-(1)(a) and (c)</p> <p>Stated: First time</p> <p>To be Completed: Before registration</p>	<p>The opening windows and their restrictors should be assessed and brought into line with the relevant safety alerts available on the NIAIC website.</p> <p>Response by Registered Manager Detailing the Actions Taken: These windows have restrictors attached. These have now been locked into place as required.</p>

Requirement 10 Ref: Regulation 14.-(1)(a) and (c) Stated: First time To be Completed: Before registration	<p>The loop window blind cords should be assessed in line with relevant safety alerts on the NIAIC website.</p> <p>Response by Registered Manager Detailing the Actions Taken: A MCW's has been raised by the client department (Hawthorns) to address this issue. An estimated completion date of 31/7/2015</p>
Requirement 11 Ref: Regulation 26.-(4)(a) Stated: First time To be Completed: Before registration	<p>The fire risk assessment should be obtained and any issues identified should be fully addressed.</p> <p>Response by Registered Manager Detailing the Actions Taken: The Trust fire officer has assessed the building and advised the staff of evacuation measures. He has also completed a full risk assessment and will organise for a full evacuation drill once the members have moved in.</p>
Requirement 12 Ref: Regulation 26.-(4)(b) and (d)(iv) Stated: First time To be Completed: Before registration	<p>It should be confirmed that the fire detection and alarm system and the emergency lights have been installed, commissioned and are being maintained in accordance with the relevant British Standard (BS5839 for alarm system and BS5266 for emergency lights.)</p> <p>Response by Registered Manager Detailing the Actions Taken: Document attached Certification has been received and NHSCT will update the PPM contract schedules by 31/7/2015.</p>
Requirement 13 Ref: Regulation 26.-(2)(a) Stated: First time To be Completed: Before registration	<p>Consideration should be given to converting the enclosed ground floor room into additional toilet facilities.</p> <p>Response by Registered Manager Detailing the Actions Taken: Once move has taken place demand on bathrooms will be assessed and if deemed appropriate a minor works request will be submitted in relation to additional toilet facilities.</p>
Requirement 14 Ref: Regulation 26.-(2)(k) Stated: First time To be Completed:	<p>The ventilation of the proposed kitchen should be reviewed.</p> <p>Response by Registered Manager Detailing the Actions Taken: A request has been sent to our estates department to action this. A MCW's has been raised by the client department (Hawthorns AC) estimated completion date by 31/7/2015</p>

Before registration			
Requirement 15 Ref: Regulation 26.-(4)(c) and (d)(i) Stated: First time To be Completed: Before registration	<p>If, for operational reasons, fire doors are required to stand open they should be fitted with appropriate stand open devices which are linked to the fire detection and alarm system. The advice of the fire safety officer should be sought.</p> <p>Response by Registered Manager Detailing the Actions Taken: A request has been sent to our estates department to action this.</p>		
Requirement 16 Ref: Regulation 26.-(4)(a) and (e) and (f) Stated: First time To be Completed: Before registration	<p>Daily and emergency fire safety procedures specific to the building should be established and staff trained and drilled in their implementation.</p> <p>Response by Registered Manager Detailing the Actions Taken: A folder has been created for recording required fire safety checks. Evacuation measures have been put in place and staff are fully aware of their responsibilities.</p>		
Recommendations			
Recommendation 1 Ref: Standard 25 Stated: First time	<p>The floor covering in the kitchen should be changed to a suitable washable anti slip sheet material.</p> <p>Response by Registered Manager Detailing the Actions Taken: The floor in the kitchen area has been changed to a washable, anti slip surface as requested.</p>		
Registered Manager Completing QIP	Marc Carey	Date Completed	07/07/15
Registered Person Approving QIP	Tony Stevens	Date Approved	14/07/15
RQIA Inspector Assessing Response	Colin Muldoon	Date Approved	25/09/2015 *

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.