



The Regulation and
Quality Improvement
Authority

Age NI 'Ballyclare'
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Ballyclare Town Hall
The Square, Main Street
Ballyclare
BT39 9BB

Inspector: Gavin Doherty
Inspection ID: IN021557

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**Announced Estates Inspection
of
Age NI 'Ballyclare'**

18 May 2015

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 18 May 2015 from 10.30 to 11.30. 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: Ms Linda Robinson, Age NI	Registered Manager: Ms Shan Horan
Person in Charge of the Premises at the Time of Inspection: Ms Shan Horan	Date Manager Registered: 29 April 2014
Categories of Care: DCS-DE	Number of Registered Places: 10
Number of Service Users Accommodated on Day of Inspection: 10	Weekly Tariff at Time of Inspection: Not confirmed

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 Estate's inspection report
- Statutory notifications received over the past 12 months.

During the inspection the inspector did not meet with any service users, care staff, visiting professionals or service user's representatives.

The following records were examined during the inspection:

- Fire Risk assessment
- Fire Safety service records and in-house log books
- Electrical Certificates and associated records
- Control of Legionella bacteria risk assessment and control records

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 5 May 2015. The completed Quality Improvement Plan for this inspection is due to be returned on 30 June 2015 and will be assessed by the care inspector at this time.

Any areas requiring further clarification will be followed up by the relevant inspector within the timeframes specified in this Quality Improvement Plan.

5.2 Review of Requirements and Recommendations from *the last* Estates Inspection

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulation 26(2)	The damaged flooring in the assisted toilet around the toilet bowl should be made good or replaced.	Met
	Action taken as confirmed during the inspection: Confirmed in returned QIP and by inspector during current inspection.	
Requirement 3 Ref: Regulation 26(4)	Ensure that the Fire risk assessment carried out on the 2 October 2013 is fully implemented and signed off accordingly.	Met
	Action taken as confirmed during the inspection: Inspector confirmed X, Y and Z were available and up to date at the time of inspection.	
Previous Inspection Recommendations		Validation of Compliance
Recommendation 2 Ref: Standard 25	The badly stained carpet at the main entrance to the day room should be replaced or a barrier mat provided which could be removed and cleaned at regular intervals.	Not Met
	Action taken as confirmed during the inspection: Issues with the sub floor have led to a delay in the replacement of this floor. Refer to section 5.3 for further details.	

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

Areas for Improvement

The badly stained flooring to the main day space was not replaced subsequent to the recommendation made in the previous estates inspection on 11 December 2013. However, this issue has been noted in the most recent care inspection which was undertaken on 5 May 2015. The care inspector at this time made the following requirement:

The registered persons must ensure:

- (a) the area of uneven floor at the inside entrance of the main room used by service users is made even and good;
- (b) the flooring is replaced in the main group room.

The manager has confirmed that the landlord has been informed of the problem with the sub-floor at the entrance to the day space on 15 May 2015 and once this has been resolved, the floor finish will be replaced.

This shortcoming will therefore be resolved through the requirement made in the care inspection report dated 5 May 2015.

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 and safety procedures and control measures in place which support the delivery of compassionate care.

Areas for Improvement

No improvements were deemed necessary against this standard as a result of this inspection. This is to be commended.

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 improvements were deemed necessary against this standard as a result of this inspection. This is to be commended.

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

No additional areas were examined during this inspection.

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.

Registered Manager	Shan Horan	Date Completed	03/7/15
Registered Person	Linda Robinson	Date Approved	03/7/15
RQIA Inspector Assessing Response	Gavin Doherty	Date Approved	06/07/2015

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

Please ensure in full and returned to estates.mailbox@rqia.org.uk from the authorised email address