



The **Regulation** and
Quality Improvement
Authority

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**Announced Estates Inspection
of
Mindwise Day Care**

19 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 19 May 2015 from 14.15 to 16.00 hrs. 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 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	2	1

The details of the QIP within this report were discussed with the Mr Paddy Murtagh, Manager as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Organisation/Registered Person: Edward George Alexander Mindwise	Registered Manager: Mr Paddy Murtagh
Person in Charge of the Premises at the Time of Inspection: Mr Paddy Murtagh	Date Manager Registered: 27 April 2010 (application date)
Categories of Care: DCS-MP, DCS-MP(E)	Number of Registered Places: 15
Number of Service Users Accommodated on Day of Inspection: 10	Tariff at Time of Inspection: £17.08 per day

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:

- Incidents register
- Previous estates inspection report dated 3 December 2012
- Previous RQIA inspection report, IN020624 dated 13 November 2014 (Care Inspection).

During the inspection the inspector met with two care staff, Paddy Murtagh (Manager) and Raymond McGurk (Care Worker); no other discussions were held with staff, visitors or service users.

The following documents were reviewed during the inspection:

- Fire safety risk assessment plus records relating to the maintenance and inspection of the fire safety equipment;
- Legionella risk assessment plus records relating to the maintenance and inspection of the water storage and distribution services;
- Records relating to Lifting Operations and Lifting Equipment maintenance/inspection control measures.
- Records relating to general health and safety control measures/inspections

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the service was an announced care inspection dated 13 November 2014. The completed QIP was returned, and on 22 February 2015 the care inspector has indicated that further information/clarification is required to ascertain that the 13 November 2014 report requirements/recommendations have been addressed.

The ambient air temperature of the internal environment was to be monitored to establish that conditions remained satisfactory for day care service users.

5.2 Review of Requirements and Recommendations from the last Estates Inspection

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulations 14.(1)(a) & (c)	Complete a review of the legionella risk assessment, verify that the recommended improvements and control measures listed in the original risk assessment dated 17 April 2009 have been implemented or scheduled in a works action plan for implementation.	Met
	Action taken as confirmed during the inspection: Improvement works completed.	
Requirement 2 Ref: Regulation 26.(4)(a)	Evaluate and identify the fire risk rising from or in connection with the day care centre activities, record the significant findings and implement risk reduction control measures.	Met
	Action taken as confirmed during the inspection: Risk assessments completed.	
Requirement 3 Ref: Regulations 26.(4)(d)(i) & (ii)	Submit verification that the fire detection and alarm system is maintained and tested by a competent person in accordance with BS5839.	Partially Met
	Action taken as confirmed during the inspection: Annual maintenance certificate reviewed.	

Requirement 4 Ref: Regulations 26.(4)(c) & (d)(iii)	Submit verification that the emergency lighting system is maintained and tested by a competent person in accordance with BS5266.	Not Met
	Action taken as confirmed during the inspection: Records were not presented for review.	
Previous Inspection Recommendations		Validation of Compliance
Recommendation 1 Ref: Standard 27.1	Complete a `suitable and sufficient` risk assessment specific to each woodworking appliance and specific to each individual service user; implement any recommended control measures. Specific reference should be made to Health and Safety Executive publications “using work equipment safely “INDG229 (rev2) and “Five Steps to Risk Assessment”, INDG 163.	Met
	Action taken as confirmed during the inspection: Risk assessments implemented.	

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 documents related to the maintenance of the premises was presented for review during this Estates inspection. The documentation included inspection/test reports and risk assessments for various elements of the engineering services; 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.

[An issue was however identified for attention during this Estates inspection. It is detailed in the ‘areas for improvement’ section below.]

Areas for Improvement

Ambient air temperatures in the building were noted as below the required temperature range during a care inspection on 13 November 2014. A heat loss survey has been completed and its findings are being assessed. Once the evaluation is complete then a prioritised improvement works programme is to be implemented.

Number of Requirements	0	Number Recommendations:	1
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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 documents 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, 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

Not applicable.

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.

[A number of issues were however identified for attention during this Estates inspection. These are detailed in the 'areas for improvement' section below.]

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.

[A number of issues were however identified for attention during this Estates inspection. These are detailed in the 'areas for improvement' section below.]

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.

[A number of issues were however identified for attention during this Estates inspection. These are detailed in the 'areas for improvement' section below.]

Areas for Improvement

The Fire alarm system was not serviced by a competent person at six monthly intervals.

BS5266 emergency lighting competent person service inspection records were not presented for review.

Number of Requirements	2	Number Recommendations:	0
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5.6 Additional Areas Examined

Not applicable.

6. Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Paddy Murtagh (Manager) during the inspection process. The timescales commence from the date of inspection.

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

6.1 Statutory Requirements

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

6.2 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.

6.3 Actions Taken by the Registered Manager/Registered Person

The QIP should be completed by the registered manager to detail the actions taken to meet the legislative requirements stated. The registered person will review and approve the QIP to confirm that these actions have been completed by the registered manager. Once fully completed, the QIP will be returned to estates.mailbox@rqia.org.uk and assessed by the inspector.

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 service. 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 service.

Quality Improvement Plan			
Statutory Requirements			
Requirement 1 Ref: Regulation 26.(4)(d)(i) & (ii) Stated: Second time To be Completed by: 21 July 2015	Submit verification that the fire detection and alarm system is maintained and tested by a competent person in accordance with BS5839. Response by Registered Manager Detailing the Actions Taken: The fire detection and alarm system has been tested by a competent person on 20/5/15. Further six monthly checks have been scheduled with a competent person.		
Requirement 2 Ref: Regulation 26.(4)(c) & (d)(iii) Stated: Second time To be Completed by: 21 July 2015	Submit verification that the emergency lighting system is maintained and tested by a competent person in accordance with BS5266. Response by Registered Manager Detailing the Actions Taken: The emergency lighting system has been tested by a competent person on 20/5/15. Further six monthly checks have been scheduled with a competent person.		
Recommendations			
Recommendation 1 Ref: Standard 25 Stated: First time To be Completed by: 21 September 2015	Assess the heat loss survey data and implement an improvement works action plan to maintain ambient air temperatures within the required range. Response by Registered Manager Detailing the Actions Taken: A plan has been developed to address the issue with the ambient air temperatures. However, Standard 25 does not provide guidance on temperatures for non-sedentary activities and, as discussed during the estates inspection, this will be highlighted to the inspector during the unannounced primary care inspection.		
Registered Manager Completing QIP	P Murtagh	Date Completed	17/6/15
Registered Person Approving QIP	Edward Gorringer	Date Approved	18/6/15
RQIA Inspector Assessing Response	Raymond Sayers	Date Approved	3/8/2015

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