

The Regulation and
Quality Improvement
Authority

Killadeas Day Care
RQIA ID: 11271
46 Drumwhinney Road
Rosculban
Kesh
BT93 1TN

Inspector: Raymond Sayers
Inspection ID: IN021522

Tel: 028 6863 2634

Email:

patricia.griffith@westerntrust.hscni.net

**Announced Estates Inspection
of
Killadeas Day Care, Kesh**

29 September 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 29 September 2015 from 09.30 to 11.45 hours. 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	2	0

The details of the QIP within this report were discussed with the Ms Patricia Griffith (Manager) and Mr Gerry Marshall (Western HSC Trust Estates Officer) as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Organisation/Registered Person: Western Health and Social Care Trust/ Ms Elaine Way CBE	Registered Manager: Ms Patricia Griffith
Person in Charge of the Premises at the Time of Inspection: Ms Patricia Griffith	Date Manager Registered: 21 June 2013
Categories of Care: DCS-LD	Number of Registered Places: 30
Number of Service Users Accommodated on Day of Inspection: 21	Weekly Tariff at Time of Inspection: <i>Trust rates</i>

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 and themes 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 estates inspection report, statutory notifications over the past 12 month period.

During the inspection the inspector met with Ms Patricia Griffith and Mr Gerry Marshall.

The following records were examined during the inspection: Copies of building service certificates, building user maintenance log books relating to the building and engineering services, legionellae risk assessment and fire risk assessment.

5. The Inspection

5.1 Review of Requirements from Previous Inspection

The previous inspection of the service was a primary announced care inspection dated 05 June 2014, reference IN016579. The completed QIP was returned, and approved by the specialist inspector on 11 August 2014.

5.2 Review of Requirements from the last Estates Inspection completed on 26 November 2013.

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulations 14.(1)(a),(b) and (c)	Verify that Lifting Operations and Lifting Equipment Regulations (LOLER) Regulation 9 thorough examinations are implemented on lifting appliances at a maximum interval of six months between consecutive inspections.	Met
	Action taken as confirmed during the inspection: Copies of LOLER certificates examined.	
Requirement 2 Ref: Regulations 14.(1)(a),(b) and (c)	Verify that the carbon monoxide sensor located in the boiler room is subjected to periodic user control tests.	Met
	Action taken as confirmed during the inspection: Control checks implemented and records maintained.	
Requirement 3 Ref: Regulation 14.(1)(a)	Display a fire plan detail adjacent the fire alarm panel.	Met
	Action taken as confirmed during the inspection: Fire plan displayed.	

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. This documentation included inspection and test reports for various elements of the engineering service plus associated risk assessments. This supports the delivery of safe care.

[There were no issues identified for attention during this Estates inspection.]

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.

[There were no issues identified for attention during this Estates inspection.]

Is Care Compassionate? (Quality of Care)

Accommodation reviewed during this Estates inspection was well maintained, clean and free from malodours. This supports the delivery of compassionate care.

[There were no issues identified for attention during this Estates inspection.]

Areas for Improvement

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 documents related 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.

[An issue was identified for attention during this Estates inspection; the details are listed in the areas for improvement section listed below]

Is Care Effective? (Quality of Management)

The dependency and needs of the service users 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.

[There was an issue identified for attention during this Estates inspection; the details are listed in the areas for improvement section listed below]

Is Care Compassionate? (Quality of Care)

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

[There were no issues identified for attention during this Estates inspection.]

Areas for Improvement

A legionella risk assessment was completed and control measures implemented, management issues however were not verified as implemented.

Reference: Quality Improvement Plan requirement 1.

Vehicle parking is a problem issue around the facility; cars were parked at the rear of the building restricting service user access to a rear patio/garden area. Vehicles were also parked on the roadside adjacent the main vehicle entrance to the site; this could potentially obstruct a vehicle driver's view of oncoming traffic whilst departing from the site.

Reference: Quality Improvement Plan requirement 2.

Number of Requirements	2	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, including: 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.

[There were no issues identified for attention during this Estates inspection.]

Is Care Effective? (Quality of Management)

The standard used by 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 listed in the fire risk assessment. This supports the delivery of effective care.

[There were no issues identified for attention during this Estates inspection.]

Is Care Compassionate? (Quality of Care)

The standard used by the registered persons to determine the extent of fire safety protection required, recognises the need to maintain a homely, non-institutionalised environment. This supports the delivery of compassionate care.

[There were no issues identified for attention during this Estates inspection.]

Areas for Improvement

Not applicable

Number of Requirements	0	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 Ms Patricia Griffith (Manager) and Mr Gerry Marshall (Western HSC Trust Estates Officer) as part of 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

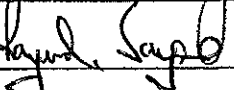
6.2 Recommendations

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: Regulations 14.(1)(a),(b) and (c) Stated: First time To be Completed by: 08 December 2015	Submit verification that the legionella risk assessment management policy, controls and procedures, are implemented. Response by Registered Manager Detailing the Actions Taken: Risk Assessment and Water Hygiene Survey Report attached.		
Requirement 2. Ref: Regulations 14.(1)(a),(b) and (c) Stated: First time To be Completed by: 08 December 2015	Complete a review of car parking and vehicle movement activities on and adjacent the facility. Implement health and safety controls to assure the health, safety and welfare of service users, prior to completion of the car parking site traffic review. Response by Registered Manager Detailing the Actions Taken: A Risk Assessment has been completed and shared with the WHSCT Risk Management Department, Head of Service and all other relevant parties with a review to reaching a solution with the landlord, tenants and other businesses on site.		
Registered Manager Completing QIP	 Patricia Griffith	Date Completed	06.11.15
Registered Person Approving QIP		Date Approved	04.12.15
RQIA Inspector Assessing Response		Date Approved	14.12.15

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