



The Regulation and
Quality Improvement
Authority

Age NI, Anna House
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**Announced Estates Inspection
of
Age NI, Anna House**

21 October 2015

The Regulation and Quality Improvement Authority
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Tel: 028 9051 7500 Fax: 028 9051 7501 Web: www.rqia.org.uk

1. Summary of Inspection

An announced estates inspection took place on 21 October 2015 from 10.30 to 11.45. 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 | 2 | 0 |

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

2. Service Details

| | |
|-------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| Registered Organisation/Registered Person: Ms Linda Robinson, Age NI | Registered Manager: Ms Gillian Thompson |
| Person in Charge of the Premises at the Time of Inspection: Ms Gillian Thompson | Date Manager Registered: 14 December 2010 |
| Categories of Care: DCS-I | Number of Registered Places: 15 |
| Number of Service Users Accommodated on Day of Inspection: 15 | Weekly Tariff at Time of Inspection: Not ascertained |

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 patients, visiting professionals or patient's representatives.

The following records were examined during the inspection:

- Fire risk assessment
- Fire safety service records and in-house log books
- Electrical certificates & associated records.
- Legionella risk assessment and controls records

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 29 April 2014. The completed QIP was returned and approved by the specialist inspector.

There were no areas to follow up or address as a result of this inspection.

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)(l) | Provide suitable evidence that, the fixed electrical installation for the facility is inspected and tested in accordance with BS7671:2008 'Requirements for Electrical Installations' and that it is in a Satisfactory condition. | Not Met |
| | Action taken as confirmed during the inspection: No records in relation to this inspection were available at the centre for inspection. | |
| Requirement 2 Ref: Regulation 26 (4)(a) | Ensure that the Fire risk assessment carried out on the 18 October 2012 is fully implemented and signed off accordingly. | Met |
| | Action taken as confirmed during the inspection: The fire risk assessment was reviewed in October 2014. There were no significant findings noted. | |
| Requirement 3 Ref: Regulation 26 (4)(c) | Provide suitable evidence that both the fire alarm and detection system and the emergency lighting installation for the facility are inspected and tested in accordance with BS5839-1:2013 and BS5266-8:2004 respectively. | Not Met |
| | Action taken as confirmed during the inspection: No records in relation to these inspections were available at the centre for inspection. | |

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.

Areas for Improvement

There were no areas of improvement identified against this standard as a result of this inspection.

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|-------------------------------|----------|--------------------------------|----------|
| Number of Requirements | 0 | Number Recommendations: | 0 |
|-------------------------------|----------|--------------------------------|----------|

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

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

Areas for Improvement

There was no information available within the centre with regards to the ongoing inspection and testing of the premises fixed wiring installation. It is essential that this inspection is undertaken and that the installation is deemed to be in a 'satisfactory' condition. Suitable evidence should be forwarded to RQIA without further delay, to confirm the above

| | | | |
|-------------------------------|----------|--------------------------------|----------|
| Number of Requirements | 1 | Number Recommendations: | 0 |
|-------------------------------|----------|--------------------------------|----------|

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. 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.

Areas for Improvement

There was no information available within the centre with regards to the ongoing inspection and testing of the premises emergency lighting installation and fire alarm & detection system. It is essential that these inspections are undertaken in accordance with current best practice guidance, and that the systems deemed to be in a 'satisfactory' condition. Suitable evidence should be forwarded to RQIA without further delay, to confirm the above.

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|-------------------------------|----------|--------------------------------|----------|
| Number of Requirements | 1 | Number Recommendations: | 0 |
|-------------------------------|----------|--------------------------------|----------|

5.6 Additional Areas Examined

No additional areas were examined as part of this inspection.

6. Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Ms Gillian Thompson 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: Regulation 26 (2) Stated: Second time To be Completed by: 16 December 2015 | Provide suitable evidence that, the fixed electrical installation for the facility is inspected and tested in accordance with BS7671:2008 'Requirements for Electrical Installations' and that it is in a Satisfactory condition. Response by Registered Manager Detailing the Actions Taken: A fixed wiring test was completed on 24 th November 2015 (Fire Safety Solutions) | | |
| Requirement 2 Ref: Regulation 26 (4) Stated: Second time To be Completed by: 16 December 2015 | Provide suitable evidence that both the fire alarm and detection system and the emergency lighting installation for the facility are inspected and tested in accordance with BS5839-1:2013 and BS5266-8:2004 respectively. Response by Registered Manager Detailing the Actions Taken: The fire alarm system and emergency lighting facilities were inspected and tested on 24 th November 2015. (Fire Safety Solutions) | | |
| Registered Manager Completing QIP | Gillian Thompson | Date Completed | 25/11/15 |
| Registered Person Approving QIP | Linda Robinson | Date Approved | 25/11/15 |
| RQIA Inspector Assessing Response | Gavin Doherty | Date Approved | 7/1/2016 |

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