

The Regulation and
Quality Improvement
Authority

Castlederg Outreach
RQIA ID: 11296
Castlederg District Enterprise Centre
Drumquin Road
Castlederg
BT81 7PX

Inspector: Raymond Sayers
Inspection ID: IN021513

Tel: 028 81679828
Email:
niall.campbell@westerntrust.hscni.net

**Announced Estates Inspection
of
Castlederg Outreach Centre**

10 March 2016

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 10 March 2016 from 10.00 am to 12.30pm. 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	2

The details of the QIP within this report were discussed with the Mr Niall Campbell (Registered 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: Mr Niall Campbell
Person in Charge of the Premises at the Time of Inspection: Mr Niall Campbell	Date Manager Registered: 20 August 2014
Categories of Care: DCS-LD	Number of Registered Places: 18
Number of Service Users Accommodated on Day of Inspection: 16	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 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 and statutory notifications over the past 12 month's period.

During the inspection the inspector met with Mr Gerry Marshall (Western HSC Trust Estates Officer) and Mr Niall Campbell (Registered Manager).

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

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the service was unannounced care inspection, IN022806 dated 18 August 2015. The completed QIP was returned, and reviewed by the care inspector on 06 October 2015.

5.2 Review of Requirements and Recommendations from the last Estates Inspection on 18 June 2013.

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulation 26.(2)(l)	Submit a copy of a valid BS7671 Periodic Inspection Report for the electrical installation, verify that any issues listed in the report have been assessed and corrective works implemented in compliance with the Electricity at Work Regulations.	Met
	Action taken as confirmed during the inspection: Verified as completed.	
Requirement 2 Ref: Regulation 26.(2)(n)	Complete a legionella risk assessment review and implement any subsequent recommendations.	Met
	Action taken as confirmed during the inspection: Implemented.	
Requirement 3 Ref: Regulation 26.(4)(c)	Submit a copy of the annual BS5266 inspection/test report for the emergency lighting installation.	Met
	Action taken as confirmed during the inspection: Implemented.	
Previous Inspection Recommendations		Validation of Compliance
Recommendation 1 Ref: Standard 27.1	Install a low surface temperature cover on wall mounted hall radiator.	Met
	Action taken as confirmed during the inspection: 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 in 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 services and risk assessments. This supports the delivery of safe care.

Issues were identified for attention during this Estates inspection, and are detailed in the 'areas for improvement' section below.

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)

The areas of the premises reviewed during this Estates inspection were 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

1. The front activity room glazed wall screen and door has sustained some deterioration damage through the weathering process; it is noted that there is a cold air flow adjacent the lower wall panels and it is suspected that the thermal insulation value of this wall construction is low.
The emergency exit door glazing trims are damaged and breaking away from the door. Refer to Quality Improvement Plan Recommendation 1.

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.

An issue was identified for attention during this Estates inspection, and is detailed in the 'areas for improvement' section below.

Is Care Effective? (Quality of Management)

The dependency and needs of the service users 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.

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

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

1. It could not be ascertained that the portable hoisting appliance had received six monthly Lifting Operations and Lifting Equipment Regulations (LOLER) thorough examinations in compliance with LOLER Regulation 9.
Refer to Quality Improvement Plan Recommendation 2.

Number of Requirements	0	Number Recommendations:	1
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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.

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

Is Care Effective? (Quality of Management)

The standard used by the registered person 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 referenced 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 measures that are appropriate for the premises 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

None.

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

None.

6. Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Mr Niall Campbell (Registered 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

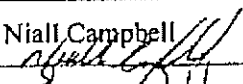
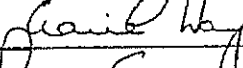

6.2 Recommendations

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			
Recommendations			
Recommendation 1	Enhance the thermal insulation performance of the front activity room timber framed external wall panel and external door. Repair the emergency final exit door glazing beads.		
Ref: Standard 25.5			
Stated: First time	Response by Registered Manager Detailing the Actions Taken: An estates request completed on 16/3/16 for this work to be carried out. The estates request numbers are 1014343 and 1014344.		
To be Completed by: 25 August 2016			
Recommendation 2	Submit verification that the mobile hoisting appliance is subjected to a LOLER "thorough examination" inspection regime in compliance with LOLER regulation 9.		
Ref: Standard 27.1			
Stated: First time	Response by Registered Manager Detailing the Actions Taken: An estates request completed on the 16/3/16 for this work to be carried out. The estates request number for this work is 1014346		
To be Completed by: 26 May 2016			
Registered Manager Completing QIP	Niall Campbell 	Date Completed	16.3.16
Registered Person Approving QIP		Date Approved	24.03.16
RQIA Inspector Assessing Response		Date Approved	4/4/16

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