



The **Regulation** and  
**Quality Improvement**  
Authority

Age NI St. Paul's Day Centre  
RQIA ID: 11302  
Ballinderry Road  
Lisburn  
BT28 1UD

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**Announced Estates Inspection  
of  
Age NI St. Paul's Day Centre incorporating 'Age NI  
Aghalee Day Centre'**

**12 February 2016**

The Regulation and Quality Improvement Authority  
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT  
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## 1. Summary of Inspection

An announced estates inspection took place on 12 February 2016 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
<b>Total number of requirements and recommendations made at this inspection</b>	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

<b>Registered Organisation/Registered Person:</b> Age NI / Ms Linda Robinson (Registration Pending)	<b>Registered Manager:</b> Ms Margaret Carlisle
<b>Person in Charge of the Premises at the Time of Inspection:</b> Mr Darran McQuoid, Acting Manager	<b>Date Manager Registered:</b> Registration Pending
<b>Categories of Care:</b> DCS-I	<b>Number of Registered Places:</b> 45
<b>Number of Service Users Accommodated on Day of Inspection:</b> Not Ascertained	<b>Weekly Tariff at Time of Inspection:</b> 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 estates inspection report, statutory notifications over the past 12 months.

During the inspection the inspector met with Darran McQuoid, acting manager and Martin Kenwell, Glebe Warden, St. Paul's.

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

#### 5. The Inspection

##### Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the service was an announced care inspection dated 25 September 2015. The completed QIP was returned and approved by the care inspector on 8 December 2015.

##### 5.1 Review of Requirements and Recommendations from *the last* Estates Inspection undertaken on 23 March 2015

Previous Inspection Statutory Requirements		Validation of Compliance
<b>Requirement 1</b> Ref: Regulation 26(2)(b)	Ensure suitable measures are taken to draught seal the external doors from the small hall, and to ensure that the temperature in the premises is maintained within a minimum temperature range of 19 <sup>0</sup> C - 22 <sup>0</sup> C whilst service users are present.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> New double glazed windows have been installed throughout the premises. The temperature of the premises was satisfactory at the time of the inspection.	
<b>Requirement 2</b>	Ensure that the seating provided in the premises is suitable and sufficient for the service users. It is	<b>Met</b>

<p><b>Ref:</b> Regulation 26(2)(c)</p>	<p>essential that the seating takes into account the mobility and overall needs of the service users, including any sensory impairment.</p>	
	<p><b>Action taken as confirmed during the inspection:</b> This item had been fully addressed at the time of the inspection.</p>	
<p><b>Requirement 3</b> <b>Ref:</b> Regulation 26(2)(a)</p>	<p>Ensure that steps are taken in consultation with the Landlord to ensure that any additional usage of the halls, and especially the kitchen, does not adversely affect the provision of service within the day centre.</p>	<b>Met</b>
	<p><b>Action taken as confirmed during the inspection:</b> The manager confirmed that suitable procedures have been implemented and that this was no longer an issue.</p>	
<p><b>Requirement 4</b> <b>Ref:</b> Regulation 14(1)(a)(c)</p>	<p>Ensure that steps are taken by the registered manager to ensure that the Landlord is fully complying with all statutory requirements in relation to the premises.</p>	<b>Met</b>
	<p><b>Action taken as confirmed during the inspection:</b> Current certificates and risk assessments were in place for all statutory requirements regarding the premises.</p>	
<p><b>Requirement 5</b> <b>Ref:</b> Regulation 27(4)(a)</p>	<p>Ensure that the fire risk assessment is current and is available on the premises. Confirmation should be provided that the significant findings contained therein have been implemented or will be implemented within the stipulated timescales of the risk assessment.</p>	<b>Met</b>
	<p><b>Action taken as confirmed during the inspection:</b> A new fire risk assessment had been carried out on 11 February 2016 and no significant findings were highlighted.</p>	

**5.2 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. The premises had been extensively refurbished since the last estates inspection. Windows had been replaced, the lighting had been renewed and new seating provided. Many areas had been redecorated and the premises were warm and comfortable at the time of the inspection. This supports the delivery of compassionate care and is to be commended.

**Areas for Improvement**

No areas for improvement were deemed necessary as a result of this inspection.

<b>Number of Requirements</b>	<b>0</b>	<b>Number Recommendations:</b>	<b>0</b>
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**5.3 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 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.

**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

No areas for improvement were deemed necessary as a result of this inspection.

<b>Number of Requirements</b>	<b>0</b>	<b>Number Recommendations:</b>	<b>0</b>
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#### 5.4 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 areas for improvement were deemed necessary as a result of this inspection.

<b>Number of Requirements</b>	<b>0</b>	<b>Number Recommendations:</b>	<b>0</b>
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#### 5.5 Additional Areas Examined

No additional areas were examined as part of this inspection.

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 home. 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.

**No requirements or recommendations resulted from this inspection.**

<b>I agree with the content of the report.</b>			
<b>Registered Manager</b>	Darren McQuiod	<b>Date Completed</b>	1/3/16
<b>Registered Person</b>	linda Robinson	<b>Date Approved</b>	1/3/16
<b>RQIA Inspector Assessing Response</b>	Gavin Doherty	<b>Date Approved</b>	9/3/2016

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

*\*Please complete in full and returned to RQIA from the authorised email address\**