



The Regulation and
Quality Improvement
Authority

**THE REGULATION AND QUALITY IMPROVEMENT
AUTHORITY**

9th floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
Tel: 028 9051 7500 Fax: 028 9051 7501

ANNOUNCED ESTATES INSPECTION

Inspection No: IN016748
Establishment ID No: 1139
Name of Establishment: Mantlin Cottage
Date of Inspection: 4 November 2014
Inspector's Name: Raymond Sayers

1.0 GENERAL INFORMATION

Name of Home:	Mantlin Cottage
Address:	Mantlin Rd Kesh BT93 1TU
Telephone Number:	028 68633149
Registered Organisation/Provider:	Praxis Care Group/Challenge / Ms Irene Elizabeth Sloan
Registered Manager:	Mr Derek Maxwell
Person in Charge of the Home at the time of Inspection:	Ms Caroline Walker (Team Leader)
Type of establishment:	Residential Home
Number of Registered Places:	Nine
Date and time of inspection:	4 November 2014 from 09.50 – 12.15hrs
Date of previous estates inspection:	13 September 2011
Name of Inspector:	Raymond Sayers

2.0 INTRODUCTION

The Regulation and Quality Improvement Authority (RQIA) is empowered under The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 to inspect residential care homes.

This is a report of an announced inspection to assess the quality of the premises and grounds in which the service is being provided including the upkeep of the building and engineering services and equipment. The report details the extent to which the standards measured during inspection were met.

3.0 PURPOSE OF THE INSPECTION

The purpose of this inspection was to consider whether the premises and grounds were safe, well maintained and remain suitable for their stated purpose in compliance with legislative requirements and current minimum standards. This was achieved through a process of evaluation of available evidence.

The Regulation and Quality Improvement Authority aims to use inspection to support providers in improving the quality of services, rather than only seeking compliance with regulations and standards.

The aims of the inspection were to examine the estates related policies, practices and monitoring arrangements for the provision of Residential Care homes, and to determine the provider's compliance with the following:

- The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003;
- The Residential Care Homes Regulations (Northern Ireland) 2005;
- Residential Care Homes Minimum Standards (DHSSPS, 2011).

Other published standards which guide best practice may also be referenced during the Inspection process.

4.0 METHODS/PROCESS

Specific methods/processes used in this inspection include the following:

- Discussion with the person in charge;
- Examination of records;
- Inspection of the home internally and externally. Residents' private bedrooms were only inspected when unoccupied and permission was granted;
- Evaluation and feedback.

Any other information received by RQIA about this regulated establishment has also been considered by the Inspector in preparing for this inspection.

5.0 CONSULTATION PROCESS

During the course of the inspection, the Inspector spoke to Ms Caroline Walker.

6.0 INSPECTION FOCUS

The inspection sought to establish the level of compliance achieved with respect to the following DHSSPS Residential Care Homes Minimum Standards and to assess progress with the issues raised during and since the previous inspection:

Standards inspected:

- Standard 27 - Premises and grounds;
- Standard 28 - Safe and healthy working practices;
- Standard 29 - Fire Safety.

7.0 PROFILE OF SERVICE

Mantlin Cottage Residential Care Home is operated by Praxis Care Group. The home is registered for LD and LD(E) category of care.

Mantlin Cottage is a single storey dwelling situated within walking distance of Kesh in County Fermanagh. The house comprises of nine single "en suite" bedrooms, two sitting rooms ,a kitchen, dining room, bathroom, shower room, toilet facilities a laundry room and an office. There is also a staff "sleep over" room.

There is a small garden area and smoking area to the front of the building and a large parking area to the rear of the building.

8.0 SUMMARY

Following the Estates Inspection of Mantlin Cottage on 4 November 2014 improvements are required to comply with the Residential Care Homes Regulations (Northern Ireland) 2005 and the criteria outlined in the following standards:

- Standard 27 - Premises and grounds;
- Standard 28 - Safe and healthy working practices;
- Standard 29 - Fire Safety.

This resulted in six requirements and two recommendations, listed in the quality improvement plan appended to this report.

The condition of floor coverings and interior decorated surfaces had deteriorated in some communal accommodation.

The electrical, gas service and fire detection and alarm systems inspection verification certificates should be reviewed and control measures implemented to ensure compliance with statutory standards.

The Estates Inspector would like to acknowledge the assistance of Ms Caroline Walker during the inspection process.

9.0 INSPECTOR'S FINDINGS

9.1 Recommendations and requirements from previous inspection

It is noted that a number of issues raised in the report of the previous estates inspection on 13 September 2011 have been addressed. Some issues require further attention and are restated in the relevant sections of the attached quality improvement plan sub-titled 'restated recommendations/requirements'.

No	Regulation Ref.	Requirements	Action taken - as confirmed during this inspection	Inspector's Validation of Compliance
1	Regulation 27 (2)(d)	Complete a redecoration of Dining/Lounge room ceilings and walls.	Lounge in poor decorative condition	Not compliant Refer to QIP item 1
2	Regulation 27 (2)(b)	Replace bedroom 6 en-suite WC cistern lid.	Completed	Compliant
3	Regulation 14 (2)(a)	Submit a copy of a valid Gas Safe Register inspection report for the kitchen cooker appliance.	Verified;25 April 2014 Gas Safe Report viewed	Compliant
4	Regulation 14 (2)(c)	Submit a valid copy of BS7671 Periodic Inspection NICEIC report; reference details A, B, C, D, E and F must be completed.	Verified complete IPN3/0207703 PIR dated 7 September 2011;	Compliant

No	Regulation Ref.	Requirements	Action taken - as confirmed during this inspection	Inspector's Validation of Compliance
5	Regulation 27 (4)(a)	Assess the facility HTM84 fire safety audit, prioritize a works action plan and implement corrective/improvement works. Submit a copy of works action plan for RQIA inspector record.	Completed; 30 July 2014 fire risk assessment report examined.	Compliant
6	Regulation 27 (4)(d)	Verify that the engineer inspection/test regime is completed at intervals compliant with BS5839.	Verified as completed.	Compliant
No	Minimum Standard Ref.	Recommendations	Action Taken – as confirmed during this inspection	Inspector's Validation of Compliance
7	Standard 27.1	Replace communal shower-room and bedroom 5 en-suite floor coverings.	Completed	Compliant
8	Standard 27.1	Complete a condition audit of shower room/en-suite wall panel surfaces, implement repair/replacement works.	Partial works completion; Bedrooms 1, 5 & 8 have damaged ensuite wall surfaces.	Partial compliance. Refer to QIP item 4
No	Minimum	Recommendations	Action Taken – as confirmed during this	Inspector's Validation of

	Standard Ref.		inspection	Compliance
9	Standard 27.1	Complete repair works to bedroom 9 radiator cover.	Completed	Compliant
10	Standard 27.1	Redecorate interior window sill boards.	Not completed	Not compliant Refer to QIP item 5
11	Standard 27.1	Redecorate bedroom 5 en-suite ceiling.	Completed	Compliant
12	Standard 28.1	Verify that Thermostatic Mixing Valves are maintained in accordance with a safe hot water and surface temperatures risk assessment.	Completed	Compliant
13	Standard 29.2	Implement and record user monitoring of fire fighting equipment and fire prevention control measures.	Completed	Compliant

9.2 Standard 27 - Premises and grounds - *The premises and grounds are safe, well maintained and remain suitable for their stated purpose*

9.2.1 There was evidence of maintenance activity and the home appeared clean and well decorated. Some maintenance procedures for the building and engineering services require corrective/improvement works in order to comply with this standard. Items requiring corrective/improvement works are detailed in report paragraphs 9.2.1-9.2.3, and in the attached Quality Improvement Plan titled '**Standard 27 - Premises and grounds**'.

9.2.2 Wall finish was in poor decorative condition in the following rooms:

- Small Lounge;
- Bedroom 1;
- Bedroom 5;

(Reference: Quality Improvement Plan Item 1)

9.2.3 Bedrooms 1, 3 & small lounge ceilings were in poor decorative condition.

(Reference: Quality Improvement Plan Item 1)

9.2.4 Floor finishes were damaged and in poor physical condition in the following rooms:

- Large lounge;
- Small lounge.

(Reference: Quality Improvement Plan Item 3)

9.2.5 Bedroom 1 en-suite shower floor finish skirting was damaged.

(Reference: Quality Improvement Plan Item 3)

9.3 Standard 28 - Safe and healthy working practices - *The home is maintained in a safe manner*

9.3.1 Safe and healthy working practices are evident in the home compliant with this standard, although some issues have been identified for attention. Items requiring corrective/improvement action are detailed in report paragraphs 9.3.2 - 9.3.4, and in the attached Quality Improvement Plan section titled '**Standard 35 - Safe and healthy working practices**'.

9.3.2 The BS7671 Periodic Inspection Report for the electrical installation IPN3/0207703 was presented for examination; the certificate was valid for a period of one year, the inspection date was not inserted on the report and an accompanying letter from Victoria Electrics was dated 20 November 2012. (Reference: Quality Improvement Plan Item 6)

- 9.3.3** A Gas Safe Register inspection report for the kitchen cooker, dated 25 April 2014 was presented for examination, a number of recommended improvement works were listed for implementation; it was not verified that the recommended improvement works were completed.
(Reference: Quality Improvement Plan Item 7)
- 9.4** **Standard 29: Fire safety** - *Fire safety precautions are in place that reduce the risk of fire and protect residents, staff and visitors in the event of fire.*
- 9.4.1** Fire Safety procedures are completed in the home and a fire risk assessment review was completed in April 2013; maintenance engineer service records were available for examination. Issues requiring corrective action by the registered person are detailed in report paragraphs 9.4.2- 9.4.3 and the section of the attached quality improvement plan titled '**Standard 36: Fire safety**'.
- 9.4.2** A fire risk assessment was completed by Fire Safety First (an accredited fire risk assessor) on 25 July 2014; the fire hazard risk was deemed as low and risk to life trivial.
- 9.4.3** BS5839 fire detection and alarm maintenance engineer inspection certificates dated 16 July 2013 and 16 July 2014 were presented for examination; it was not ascertained that a six monthly inspection regime was implemented.
(Reference: Quality Improvement Plan Item 8)

10.0 QUALITY IMPROVEMENT PLAN

The details of the Quality Improvement Plan appended to this report were discussed with Ms Caroline Walker as part of the inspection process.

The timescales commence from the date of inspection.

Requirements are based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 and The Residential Homes Regulations (Northern Ireland) 2005 and must be met.

Recommendations are based on the Department of Health, Social Services and Public Safety's minimum standards for registration and inspection, promote current good practice and should be considered by the management of the home to improve the quality of life experienced by residents.

The registered provider is required to record comments on the quality improvement plan.

11.0 Enquiries

Enquiries relating to this report should be addressed to:

**Regulation and Quality Improvement Authority
9th Floor
Riverside Tower
5 Lanyon Place
BELFAST
BT1 3BT**

NOTES:

The details of the quality improvement plan were discussed with Ms Caroline Walker during the inspection process.

The timescales commence from the date of inspection.

Requirements are based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 and The Residential Homes Regulations (Northern Ireland) 2005 and must be met.

Recommendations are based on the Department of Health, Social Services and Public Safety's minimum standards for registration and inspection, promote current good practice and should be considered by the management of the residential home to improve the quality of life experienced by residents.

The registered provider is required to record comments on the quality improvement plan.

The quality improvement plan is to be completed by the registered provider and registered manager and returned to estates@rqia.org.uk.

Please complete the following table to demonstrate that this Quality Improvement Plan has been completed by the registered manager and approved by the responsible person / identified responsible person:

NAME OF REGISTERED MANAGER COMPLETING QIP	Derek Maxwell
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	William McAllister on behalf of Irene Sloan

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Assurance, Challenge and Improvement in Health and Social Care

Standard 27 - Premises and grounds

The following requirements and recommendations should be noted for action in relation to Standard 27 - Premises and grounds

Item	Regulation Reference	Restated Requirements	Timescale	Details Of Action Taken By Registered Person (s)
1	Regulation 27 (2)(d)	Complete a redecoration of Dining/Lounge room ceilings and walls. (Reference: Report paragraphs 9.1.1 & 9.2.3)	12 weeks	Our Land lord, Helm Housing have advised us works are commencing week 26.01.15
Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (s)
2	Regulation 27 (2)(d)	Complete a decoration condition survey of all interior decorated surfaces; implement a planned redecoration works programme; Submit the works programme to RQIA Estates Inspector. (Reference: Report paragraphs 9.1.1, 9.2.2 & 9.2.3)	12 weeks	Our Land lord, Helm Housing have advised us works are commencing week 26.01.15 for communal areas and bedrooms will be started on the completion of the communal areas.
3	Regulation 27 (2)(d)	Complete a condition survey of all flooring finishes; Clean or replace soiled finishes and replace all deteriorated finishes. Submit the planned works programme to RQIA Estates Inspector. (Reference: Report paragraphs 9.2.4 & 9.2.5)	12 weeks	Our Land lord, Helm Housing have advised us works are commencing week 26.01.15

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Item	Standard Reference	Restated Recommendations	Timescale	Details Of Action Taken By Registered Person (s)
4	Standard 27.1	Complete a condition audit of shower room/en-suite wall panel surfaces; implement repair/replacement works. (Reference: Report paragraph 9.1.8)	12 weeks	Our Land lord, Helm Housing have advised us works are commencing week 26.01.15
5	Standard 27.1	Redecorate window sill boards. (Reference: Report paragraphs 9.1.10)	12 weeks	Our Land lord, Helm Housing have advised us works are commencing week 26.01.15

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Assurance, Challenge and Improvement in Health and Social Care

Standard 28 - Safe and healthy working practices

The following requirements and recommendations should be noted for action in relation to Standard 28 - Safe and healthy working practices

Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (s)
6	Regulations 14 (2)(a),(b) & (c)	Submit written verification that the BS7671 Periodic Inspection Report for the electrical installation is currently valid. (Reference: Report paragraph 9.3.2)	8 weeks	Completed on 17.12.14. Awaiting our land lord to post down certificate.
7	Regulations 14 (2)(a),(b) & (c)	Verify that the Gas Safe Register inspection report recommendations have been assessed and appropriate control measures are implemented. (Reference: Report paragraph 9.3.3)	8 weeks	Certificate in office dated 25.04.14

Standard 29 - Fire Safety

The following requirements and recommendations should be noted for action in relation to Standard 29 - Fire Safety

Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (s)
8	Regulations 27.(4)(d),(i),(ii),(iv) & (v)	Submit verification that the fire detection and alarm system is maintained effectively at intervals compliant with BS5839. (Reference: Report paragraph 9.4.3)	8 Weeks	Certificate in office dated 16.07.14

Announced Estates Inspection to Mantlin Cottage Residential Home on 4 November 2014

Assurance, Challenge and Improvement in Health and Social Care



Quality Improvement Plan sign off sheet for estates inspectors

Name of Home	Mantlin Cottage, Kesh ID:1139
Date of Inspection	04/11/2014
Estates Inspector	R.Sayers

QIP Position Based on Comments from Registered Persons		QIP Closed		Estates Officer	Date
		Yes	No		
A.	All items confirmed as addressed.				
B.	All items either confirmed as addressed or arrangements confirmed to address within stated timescales.				
C.	Clarification or follow up required on some items.	X	X	R.Sayers	04/02/15

Estates Inspection – QIP sign off sheet

Informing and Improving Health and Social Care