

Meadowbank RQIA ID: 1141 2 Donaghanie Rd Omagh BT79 0NR

Inspector: Raymond Sayers Inspection ID: IN021504

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Announced Estates Inspection of Meadowbank Residential Care Home

21 October 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 21 October 2015 from 09.45 to 11.30 hrs. 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 Residential Care Homes Minimum Standards 2011.

1.1 Actions/Enforcement Taken Following the Last Inspection

Other than those items 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	1

The details of the QIP within this report were discussed with the Ms Shelly Logue (Manager) and Ms Mary Rose Doherty (Apex Housing Association Maintenance Works Manager) as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Organisation/Registered Person: Age Concern/Ms Linda Robinson	Registered Manager: Ms Shelley Logue
Person in Charge of the Home at the Time of Inspection: Ms Shelley Logue	Date Manager Registered: 06 November 2012
Categories of Care: RC-DE	Number of Registered Places: 25
Number of Residents Accommodated on Day of Inspection:	Weekly Tariff at Time of Inspection: Trust rates

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 27: Premises and Grounds

Standard 28: Safe and Healthy working Practices

Standard 29: 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 Ms Shelly Logue (Manager) and Ms Margaret Rose Doherty (Apex Housing Association, Maintenance Manager).

The following records were examined during the inspection: Copies of building service records, building user maintenance log books, 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 home was an unannounced care inspection, ref. IN022201, dated 21 May 2015. The completed QIP was returned, and approved by the care inspector on 1 July 2015.

5.2 Review of Requirements and Recommendations from the last Estates Inspection

Previous Inspection	Validation of Compliance		
Requirement 1 Ref: Regulation 27.(4)(f)	Complete fire drills in compliance with NIHTM84; submit to RQIA estates inspector a copy of a fire drill completed within four weeks of estates inspection. Staff names and specific details relating to each fire drill must be recorded in the facility health and safety /fire safety file.	Met	
	Action taken as confirmed during the inspection: User checks examined and assessed as compliant.		
Requirement 2 Ref: Regulation 27.(4)(d)	Implement and record staff periodic visual inspections of firefighting equipment in compliance with BS5306 Part 3.	Met	
	Action taken as confirmed during the inspection: User checks examined and assessed as compliant.		
Previous Inspection Recommendations		Validation of Compliance	
Recommendation 1 Ref: Standard 27.1	Consider installing a robust impervious finish on wall surfaces adjacent `Belfast sink` in cleaner stores.	Met	
	Action taken as confirmed during the inspection: Repairs/improvements implemented.	iviet	

5.3 Standard 27: Premises and Grounds

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 elements of the engineering services and 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.

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

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.

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

Areas for Improvement

Bedroom 7 en-suite radiator had sustained surface corrosion.

Refer to Quality Improvement Plan, Recommendation 1.

Bedrooms 5 and 13 wall surfaces had sustained some superficial damage as a result of furniture movement.

Refer to Quality Improvement Plan, Recommendation 1.

Number of Requirements	0	Number Recommendations:	1
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5.4 Standard 28: Safe and Healthy Working Practices

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.

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

Is Care Effective? (Quality of Management)

The dependency and needs of the residents are considered as part of the risk assessment processes and this is reflected in the management of the home. 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/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**

Not applicable.

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5.5 Standard 29: Fire Safety

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 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 residents, the management policies and the availability of adequately trained staff. This standard has been referenced in the fire risk assessment and the risk assessment has been completed by an accredited risk assessor, in accordance with RQIA guidelines. 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 determines the extent of fire safety protection measures 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 Shelley Logue (Manager) and Ms Margaret Rose Doherty (Maintenance Works Manager) 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, The Residential Care Homes Regulations (Northern Ireland) 2005.

6.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and Residential Care Homes Minimum Standards 2011. 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 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. 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 home.

Quality Improvement Plan				
Recommendations				
Recommendation 1	Complete an interior decoration condition survey, plan a works schedule and implement redecoration works.			
Ref: Standard 27.1				
Stated: First time To be Completed by: 03 February 2016	Response by R	egistered Manager Detaili	ing the Actions	Taken:
Registered Manager Co	ompleting QIP		Date Completed	
Registered Person Approving QIP		Date Approved		
RQIA Inspector Assessing Response			Date Approved	

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



A completed Quality Improvement Plan from the inspection of this service is not currently available. However, it is anticipated that it will be available soon.

If you have any further enquiries regarding this report please contact RQIA through the e-mail address info@rqia.org.uk