



The Regulation and
Quality Improvement
Authority

Creamery house
RQIA ID: 1145
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BT93 1TE

Inspector: Raymond Sayers
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**Announced Estates Inspection
of
Creamery House Residential Home**

06 May 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 6 May 2015 from 1.30pm to 4.30pm. 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 Residential Care Homes Minimum Standards 2011.

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 was not implemented as a result of the findings of this inspection.

1.3 Inspection Outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	3	0

The details of the QIP within this report were discussed with Ms Lynette McHugh (Manager) 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	Registered Manager: Ms Lynette McHugh
Person in Charge of the Home at the Time of Inspection: Ms Lynette McHugh	Date Manager Registered: 2004
Categories of Care: RC-LD & RC-LD(E)	Number of Registered Places: 11
Number of Residents Accommodated on Day of Inspection: 8	Weekly Tariff at Time of Inspection: <i>As per Trust Contract</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 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: incidents register, previous RQIA Estates inspection Quality Improvement Plan (QIP) and registered manager QIP response.

During the inspection the inspector met with Ms Lynette McHugh (Manager).

The following records were examined during the inspection:

- Fire detection & alarm system BS5839 inspection certificates;
- Emergency lighting BS5266 inspection certificates;
- Fire Extinguisher maintenance inspection certificate;
- Health Technical Memorandum 84 (HTM 84) fire risk assessment;
- Thermostatic Mixing Valve maintenance certificate;
- Legionella risk assessment;
- Electrical Installation periodic inspection report; BS7671 certificate;
- Portable appliance test certificate (PAT);
- Gas appliances & pipeline "gas safe engineer" annual report;
- Lifting Operations & Lifting Equipment (LOLER) thorough examination reports for patient hoist equipment;
- Emergency Generator provision protocols;

- Space heating boiler maintenance certificate;
- Environmental Health inspection report.

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the home was an unannounced care inspection **IN16961** on 5 November 2014. The completed QIP was returned, and approved by the Care Inspector, Priscilla Clayton, on 8 January 2015.

5.2 Review of Requirements and Recommendations from the last Estates Inspection

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulations 14.(2)(a) &(c)	Verify that the electrical installation BS7671 Periodic Inspection Report recommendations have been addressed and that the facility is compliant with the Electricity at Work Regulations	Met
	Action taken as confirmed during the inspection: Periodic Inspection Report DPN5 1264336 completed 29 January 2015; valid for 3 years.	
Requirement 2 Ref: Regulations 14.(2)(a) &(c)	Complete a health and safety risk assessment on all window openings, arrange to install window opening casement restrictor devices on windows, where deemed necessary. Window opening restrictor devices must only be installed/disabled using a specialist tool. Implement management control procedures until permanent robust casement restrictors are installed.	Met
	Action taken as confirmed during the inspection: Facility management assess individual residents and apply management controls to safeguard residents.	
Requirement 3 Ref: Regulations 14.(2)(a) &(c)	The gas safe report warning/advice notice must be assessed by the Trust health and safety risk assessor and a safe system of work must be implemented.	Met
	Action taken as confirmed during the inspection: Control measures implemented.	

Requirement 4 Ref: Regulation 27.(4)(a)	Confirm that the fire risk assessment recommendations are completed or are currently listed in a valid works action plan for implementation.	Met
Action taken as confirmed during the inspection: Fire risk assessment recommendations confirmed as implemented.		
Requirement 5 Ref: Regulation 27.(4)(d)(i)	Investigate the roof void fire zone 4 automatic fire detection sensor specification and confirm that the sensor installed is appropriate for the location.	Met
Action taken as confirmed during the inspection: Roof void fire alarm sensor verified as a smoke detection sensor.		
Previous Inspection Recommendations		Validation of Compliance
Recommendation 1 Ref: Standard 27.1	Assess the condition of the exterior wall finish, plan and implement external redecoration works.	Met
Action taken as confirmed during the inspection: Exterior wall finish redecoration completed.		
Recommendation 2 Ref: Standard 28.1	Implement formal recorded visual inspection of electrical appliances in accordance with the Electricity at Work Regulations and HSE publication "Maintaining Portable and Transportable Electrical Equipment" (HSG 107, INDG 236 & 237)	Met
Action taken as confirmed during the inspection: Visual inspection of appliances recorded by facility staff.		

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 risk assessments, inspection and test reports for various elements of the engineering services. 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

Not applicable

Number of Requirements	0	Number Recommendations:	0
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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.

[Issues were however identified for attention during this Estates inspection, and are 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 home. This supports the delivery of effective care.

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

Is Care Compassionate? (Quality of Care)

There are health and safety procedures and control measures in place which support the delivery of compassionate care.

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

Areas for Improvement

The emergency generator was not subjected to a regular periodic test regime by the user, this is contrary to the manufacturer`s recommendations.

A mobile hoist appliance did not have a currently valid Lifting Operations and Lifting Equipment (LOLER) Reg. 9 thorough examination certificate available for examination.

Number of Requirements	2	Number Recommendations:	0
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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.

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

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.

[An issue was however identified for attention during this Estates inspection, and is 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.

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

Areas for Improvement

The fire risk assessment completed on 23 July 2014 listed a number of recommendations in a works action plan, several items have been implemented; the risk was deemed tolerable.

Number of Requirements	1	Number Recommendations:	0
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5.6 Additional Areas Examined

Legionella prevention control measures were implemented, HBE engineers monitored water temperatures, and analysed water samples for the presence of legionella bacteria.

6. Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Ms Lynette McHugh 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 will 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

Statutory Requirements

<p>Requirement 1</p> <p>Ref: Regulations 14.(2)(a),(b) & (c)</p> <p>Stated: First time</p> <p>To be Completed by: 01 July 2015</p>	<p>Implement an emergency generator user maintenance/test regime in accordance with the manufacturer`s instructions.</p> <p>Response by Registered Manager Detailing the Actions Taken:</p>		
<p>Requirement 2</p> <p>Ref: Regulations 14.(2)(a),(b) & (c)</p> <p>Stated: First time</p> <p>To be Completed by: 01 July 2015</p>	<p>The mobile hoist device must be subjected to a regime of “thorough” examinations by a competent person in accordance with Lifting Operations and Lifting Equipment Regulation 9.</p> <p>Response by Registered Manager Detailing the Actions Taken:</p>		
<p>Requirement 3</p> <p>Ref: Regulations 27.(4)(a)</p> <p>Stated: First time</p> <p>To be Completed by: 01 July 2015</p>	<p>The HTM84 fire risk assessment report recommendations must be assessed and implemented in a prioritised manner.</p> <p>Response by Registered Manager Detailing the Actions Taken:</p>		
Registered Manager Completing 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

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



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