



The Regulation and  
Quality Improvement  
Authority

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**Announced Estates Inspection  
of  
Slieveleague**

**23 June 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](http://www.rqia.org.uk)

## 1. Summary of Inspection

An announced estates inspection took place on 23 June 2015 from 11.00am to 13.30pm. 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 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
<b>Total number of requirements and recommendations made at this inspection</b>	4	1

The details of the QIP within this report were discussed with Ms Claire Wilson, Senior Care Assistant as part of the inspection process. The timescales for completion commence from the date of inspection.

## 2. Service Details

<b>Registered Organisation/Registered Person:</b> Mr John James Wesley Kerr	<b>Registered Manager:</b> Ms Jennifer Scott (Acting)
<b>Person in Charge of the Home at the Time of Inspection:</b> Ms Claire Wilson	<b>Date Manager Registered:</b> Not applicable
<b>Categories of Care:</b> RC-PH(E), RC-I, RC-DE, RC-MP, RC-MP(E), RC-PH.	<b>Number of Registered Places:</b> 8
<b>Number of Residents Accommodated on Day of Inspection:</b> 5	<b>Weekly Tariff at Time of Inspection:</b> £470

## 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 Claire Wilson Senior Care Assistant.

The following records were examined during the inspection: Copies of service certificates, building user 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 home was an announced care inspection, Ref. IN016971, dated 6 January 2015. The completed QIP was returned and approved by the care inspector on 9 Feb. 2015.

## 5.2 Review of Requirements and Recommendations from the last Estates Inspection on 16 May 2012.

Previous Inspection Recommendations		Validation of Compliance
<b>Recommendation 1</b> Ref: Standard 27.1	Incorporate kitchen and dining room refurbishment plans into general proposed facility extension/refurbishment project.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Refurbishment plans at planning stage; no works commenced.	
<b>Recommendation 2</b> Ref: Standard 28	Develop an emergency evacuation/business continuity action plan for implementation during potential emergency evacuation situations.	<b>Partially Met</b>
	<b>Action taken as confirmed during the inspection:</b> Business continuity plan was in place but emergency generator contract document was dated 18 May 2012.	
<b>Recommendation 3</b> Ref: Standard 29.2	Consider upgrading fire doors smoke resistant specification by incorporating smoke seals, thereby complying with NIHTM84 recommendation to install FD30S doors on fire hazard room, sub-compartment and bedroom accommodation.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Smoke seals incorporated.	

### 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 plus risk assessments. This supports the delivery of safe care.

[There were no issues related to Quality of Life 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.

[A number of issues were identified for attention during this Estates inspection. These are detailed in the 'areas for improvement' section below.]

#### Is Care Compassionate? (Quality of Care)

The accommodation reviewed during this Estates inspection was well presented, clean and free from malodours. This supports the delivery of compassionate care.

[A number of issues were identified for attention during this Estates inspection. These are detailed in the 'areas for improvement' section below.]

#### Areas for Improvement

Bedroom 4 vanity unit drawers are in a dilapidated condition, `formica` finish is peeling off timber boarding.

Ref. Requirement 1

Radiator in WC adjacent Bedrooms 4 & 5 is in a poor decorative condition; rust staining is evident around the radiator air valve.

Laundry radiator surface finish is displaying corrosion.

Ref. Requirement 2

Laundry wall surfaces are blistered and in poor decorative condition.

Ref. Requirement 2

Bedroom 4 ceiling is stained as a result of roof rainwater penetration.

Ref. Requirement 2

Ground floor bathroom wash hand tiled splash back basin silicone sealant is deteriorated/soiled.

Ref. Requirement 2

<b>Number of Requirements</b>	<b>2</b>	<b>Number Recommendations:</b>	<b>0</b>
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## 5.4 Standard 28: Safe and Healthy Working Practices

### Is Care Safe? (Quality of Life)

A range of documents related 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.

[A number of issues were identified for attention during this Estates inspection. These are detailed in the 'areas for improvement' section below.]

### Is Care Effective? (Quality of Management)

The dependency and needs of the residents are considered as part of the risk assessment processes, this is reflected in the management of the home. This supports the delivery of effective care.

[A number of issues were identified for attention during this Estates inspection. These 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.

[There were no issues related to quality of Care identified for attention during this Estates inspection.]

### Areas for Improvement

The facility does not have an emergency generator on site for supplying electrical power during electricity failures. There was a copy of a contract from a plant hire company dated 18 May 2012 to supply a 6.5KVA generator when required. A business continuity plan was not presented for review.

Ref. Requirement 3

Thermostatic mixing valve maintenance service certificates were not presented for review.

Ref. Requirement 4

<b>Number of Requirements</b>	<b>2</b>	<b>Number Recommendations:</b>	<b>0</b>
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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 identified for attention during this Estates inspection and is detailed in the 'areas for improvement' section listed 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.

[A number of 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 standard used by the registered persons to determine the extent of fire safety protection measures recognises the need to maintain a homely, non-institutionalised environment. This supports the delivery of compassionate care.

[There were no issues related to Quality of Care identified for attention during this Estates inspection.]

### **Areas for Improvement**

An emergency lighting monthly functional test record was not presented for review.  
Ref. Requirement 5

A Northern Ireland Fire & Rescue Service inspection was completed on 2 June 2015; a works action plan was issued for implementation, ref. W41/185800259.  
Corrective/improvement works are ongoing, one recommended item remains to be implemented; facility staff state that an easy-opening-device is ordered and will be installed on Dining room patio doors.  
Ref. Requirement 5

There are no residents currently requiring use of the stair-lift and it would enhance access between the floors if the chair-lift was removed.  
Ref. Recommendation 1

<b>Number of Requirements</b>	<b>1</b>	<b>Number Recommendations:</b>	<b>1</b>
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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 Claire Wilson 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](mailto: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><b>Requirement 1</b></p> <p>Ref: Regulation 27.(2)(b)</p> <p><b>Stated:</b> First time</p> <p><b>To be Completed by:</b> 15 September 2015</p>	<p>Complete an inspection survey of all bedroom furniture &amp; vanity units, complete repairs or replace dilapidated items and sealants.</p>
	<p><b>Response by Registered Manager Detailing the Actions Taken:</b></p> <p>The furniture is of an acceptable standard in all bedrooms except bedroom 4. This is built in furniture, so replacement will necessitate complete renovation of the room including flooring. This will be completed as required. A new radiator will be fitted in the W/C / shower room between rooms 4 and 5. Silicone/grout will be replaced in identified areas wherein it has become discoloured.</p>
<p><b>Requirement 2</b></p> <p>Ref: Regulation 27.(2)(d)</p> <p><b>Stated:</b> First time</p> <p><b>To be Completed by:</b> 15 September 2015</p>	<p>Complete a condition survey of all decorated surfaces, plan and implement repairs to provide and washable clean surface finishes.</p>
	<p><b>Response by Registered Manager Detailing the Actions Taken:</b></p> <p>The laundry room will be redecorated. The radiator in the laundry room will be surface cleaned and repainted.</p>
<p><b>Requirement 3</b></p> <p>Ref: Regulation 27.(2)(s)</p> <p><b>Stated:</b> First time</p> <p><b>To be Completed by:</b> 18 August 2015</p>	<p>Submit a copy of a valid business continuity plan providing assurance that the residents health, safety and welfare will be maintained during electrical power `outages`.</p>
	<p><b>Response by Registered Manager Detailing the Actions Taken:</b></p> <p>A completely new business continuity plan has been drawn up, and all information including the contingency for electrical outages has been updated.</p>
<p><b>Requirement 4</b></p> <p>Ref: Regulation 27.(2)(q)</p> <p><b>Stated:</b> First time</p> <p><b>To be Completed by:</b> 18 August 2015</p>	<p>Submit verification that Thermostatic Mixing Valves installed at hot water outlets are maintained in compliance with a valid health and safety risk assessment.</p>
	<p><b>Response by Registered Manager Detailing the Actions Taken:</b></p> <p>Thermostatic mixing control valves installed at Hot water outlets are maintained in compliance with a valid Health &amp; Safety Risk Assessment. A company checks these on an annual basis. Hot water outlets are checked for temperatures on a weekly basis.</p>

<b>Requirement 5</b>  <b>Ref:</b> Regulations 27.(4)(a),(b),(c) & (d)  <b>Stated:</b> First time  <b>To be Completed by:</b> 18 August 2015	Submit confirmation that fire safety control measures are implemented in compliance with Northern Ireland Health Technical Memorandum 84 (NIHTM84) and that Northern Ireland Fire & Rescue Service inspection report recommendations are fully addressed.		
	<b>Response by Registered Manager Detailing the Actions Taken:</b> The EOD has been fitted to the rear patio doors as required by the Fire Officer. All other areas were already met at the time of the RQIA estates inspection.		
<b>Recommendation</b>			
<b>Recommendation 1</b>  <b>Ref:</b> Standard 29  <b>Stated:</b> First time  <b>To be Completed by:</b> 15 September 2015	Remove redundant stair-lift from stairway.		
	<b>Response by Registered Manager Detailing the Actions Taken:</b> The stair lift is not in use as it is not currently required. However, should a resident be admitted who requires it, it will be serviced and a certificate obtained before it is used.		
<b>Registered Manager Completing QIP</b>	Claire Wilson	<b>Date Completed</b>	14/08/2015
<b>Registered Person Approving QIP</b>	Wesley Kerr	<b>Date Approved</b>	14/08/2015
<b>RQIA Inspector Assessing Response</b>	<b>Raymond Sayers</b>	<b>Date Approved</b>	<b>20/08/2015</b>

*\*Please ensure the QIP is completed in full and returned to [estates.mailbox@rqia.org.uk](mailto:estates.mailbox@rqia.org.uk) from the authorised email address\**