



The **Regulation** and
Quality Improvement
Authority

Inspector: Phil Cunningham
Inspection ID: IN023694

Greenhaw Lodge Care Centre
RQIA ID: 1180
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**Announced Follow up Estates Inspection
of
Greenhaw Lodge Care Centre**

9 September 2015

The Regulation and Quality Improvement Authority
Hilltop, Tyrone & Fermanagh Hospital, Omagh, BT79 0NS
Tel: 028 8224 5828 Fax: 028 8225 2544 Web: www.rqia.org.uk

1. Summary of Inspection

An announced estates inspection took place on 22 June 2015 from 12.00 to 13:30. The purpose of the inspection was to follow up on the requirement contained in the report of the estates inspection of the home carried out on 25 November 2014 relating to the refurbishment and redecoration in the home. The remaining requirements and the recommendation from that report were addressed by the provider in the period following that inspection and these are also referred to in section 5.2 below. Overall on the day of the inspection the premises supported the delivery of safe, effective and compassionate care.

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
Total number of requirements and recommendations made at this inspection	0	0

2. Service Details

Registered Organisation/Registered Person: Larchwood Care Homes (NI) Ltd (home operated by Care Circle Group)	Registered Manager: Ronagh McCaul
Person in Charge of the Home at the Time of Inspection: Ronagh McCaul	Date Manager Registered: 15 November 2011
Categories of Care: NH-A, NH-DE	Number of Registered Places: 43
Number of Patients Accommodated on Day of Inspection: 42	Weekly Tariff at Time of Inspection:

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 44: Premises and Grounds

Standard 47: Safe and Healthy working Practices

Standard 48: 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.

During the inspection the inspector met with Ronagh McCaul and Nuala Green, Director, Care Circle Group.

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the home was an unannounced medicines inspection dated 26 May 2015. There were no requirements or recommendations made as a result of the inspection.

5.2 Review of Requirements and Recommendations from the last Estates Inspection on 25 November 2014

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulations 27 (2)(a) 27 (2)(b)	Forward plan of refurbishment/redecoration including timescales to RQIA. The replacement of door furniture should be included in this. Consideration should also be given to the refurbishment of one of the currently unused bathrooms to a shower room.	Met
	Action taken as confirmed during the inspection: The provider had responded to the previous QIP as follows: "Refurbishment/redecoration will begin with 10 rooms in January, 9 in February, then 6 every other month which will be complete by the end of June. The majority will be complete by the end of February; consideration will be given to refurbish one of the unused bathrooms to a shower room."	

	<p>The inspector carried out a walk around the home and confirmed that extensive redecoration and refurbishment has been completed in the home. This included redecoration of all bedrooms providing new floor coverings and furnishings as well as new vanity units and wash hand basins. Other areas of the home were also refurbished to provide new floor coverings and decorative finishes.</p> <p>Works have also been carried out to external areas of the home to enhance these.</p> <p>The Director, Care Circle Group stated that the home's corridors were to be repainted over coming months.</p>	
<p>Requirement 2</p> <p>Ref: Regulation 27 (2)(s)</p>	<p>Carry out review of the arrangements for the contingency measures in the event of a mains electrical supply failure with particular focus on the suitability of the two hour timescale. Consideration should be given to providing automatic start-up and change-over facilities on the existing on-site generator.</p> <p>Details of this review should be forwarded to RQIA.</p> <p>Action taken as confirmed during the inspection: The provider had responded to the previous QIP and discussed the arrangements with the estates inspector following the response.</p>	Met
<p>Requirement 3</p> <p>Ref: Regulation 27 (2)(b)</p>	<p>Replace the defective cover to the 'man-hole' inspection chamber on the pathway to the right hand side of the home.</p> <p>Action taken as confirmed during the inspection: The defective cover was replaced.</p>	Met
<p>Requirement 4</p> <p>Ref: Regulation 14 (2)(c)</p>	<p>Ensure that the issues identified in the legionellae risk assessment are addressed accordingly in a timely manner.</p> <p>Action taken as confirmed during the inspection: The provider confirmed that the issues identified in the legionellae risk assessment were addressed.</p>	Met

<p>Requirement 5</p> <p>Ref: Regulation 14 (2)(a)</p>	<p>Ensure that all seldom used outlets are flushed twice weekly and details recorded</p> <hr/> <p>Action taken as confirmed during the inspection: The provider confirmed that the seldom used outlets are now subjected to twice weekly flushing by the maintenance man.</p>	<p>Met</p>
<p>Requirement 6</p> <p>Ref: Regulation 14 (2)(b)</p>	<p>The review of the legionellae risk assessment should include on-site training of the home's maintenance man and other relevant persons in the home.</p> <hr/> <p>Action taken as confirmed during the inspection: The provider confirmed that the specialist legionellae contractor had provided training to the maintenance man in the home.</p>	<p>Met</p>
<p>Requirement 7</p> <p>Ref: Regulation 27.(4)(d)(iv)</p>	<p>Carry out review of the arrangements for servicing of the home's fire alarm and detection system. This should be carried out over four quarterly visits.</p> <hr/> <p>Action taken as confirmed during the inspection: The provider confirmed that a review was carried out of the specialist company maintenance of the fire alarm and detection system and this was carried out in liaison with the fire risk assessor for the home. The review concluded that the system will remain subject to service visits on a six monthly basis. During discussion, the inspector acknowledged that this would not necessarily constitute a deviation from the provisions of the relevant British Standard (BS 5839), although the provider should keep this under review with a view to implementing service regime consisting of four service visits per year.</p>	<p>Partially met</p>

Previous Inspection Recommendations		Validation of Compliance
<p>Recommendation 1</p> <p>Ref: Standard 36.1</p>	<p>Ensure that when the fire risk assessment is next reviewed, the person carrying out the review holds professional body registration or third party certification for fire risk assessment and is registered accordingly with the relevant body. Reference should be made to correspondence issued by RQIA to all registered homes on 13 January 2013 and the guidance contained therein:</p> <p>http://www.rqia.org.uk/cms_resources/Competence%20of%20persons%20carrying%20out%20Fire%20Risk%20Assessment.pdf</p> <p>http://www.rqia.org.uk/cms_resources/A%20Guide%20to%20Choosing%20a%20Competent%20Fire%20Risk%20Assessor.pdf</p> <hr/> <p>Action taken as confirmed during the inspection:</p> <p>The provider forwarded information in response to the previous QIP to confirm that the fire risk assessor is a member of a relevant professional body and has also confirmed that the assessor is in the process of attaining entry onto the body's register of fire risk assessors.</p> <p>The inspector was satisfied that the provider is moving towards implementing this recommendation.</p>	<p>Partially Met</p>

Number of Requirements	0	Number Recommendations:	0
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No requirements or recommendations resulted from this inspection.

I agree with the content of the report.

Registered Manager	Ronagh McCaul	Date Completed	15.10.2015
Registered Person	Nuala Green	Date Approved	15.10.2015
RQIA Inspector Assessing Response	P Cunningham	Date Approved	16/10/15

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

Please complete in full and returned to RQIA at estates.mailbox@rqia.org.uk from the authorised email address