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# Announced Follow Up Estates Inspection of Seabank Residential Care Home

8 April 2016

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 follow up estates inspection took place on 08 April 2016 from 10.00 to 12.00. The purpose of the inspection was to inspect the range of improved fire safety precautions measures which have been provided in Seabank Residential Care Home over the past year.

Overall on the day of the inspection the management of fire safety in the premises supported the delivery of safe 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 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 Dawn Fullerton, Home Manager as part of the inspection process. The timescales for completion commence from the date of inspection.

#### 2. Service Details

Registered Organisation/Registered Person: William Alexander Duncan	Registered Manager: Dawn Fullerton
Person in Charge of the Home at the Time of Inspection:  Dawn Fullerton	Date Manager Registered: N/A
Categories of Care: RC-PH, RC-MP, RC-DE, RC-I, RC-MP(E), RC-PH(E)	Number of Registered Places: 37

#### 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 and/or themes have been met:

# 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, duty rota records.

During the inspection the inspector met with Dawn Fullerton, Home Manager and Alexander Duncan, Registered Provider.

The following records were examined during the inspection: Commissioning certification relating to the dry riser installation, commissioning certification relating to the gas supply line installation, commissioning certification relating to the fire alarm installation, service records relating to the fire alarm installation, service records relating to the emergency lighting installation, service records relating to the fixed wiring installation, service records relating to the electrical equipment, fire risk assessment.

# 5. The Inspection

# 5.1 Review of Requirement 3 from the last Estates Inspection on 17 June 2014

Previous Inspection Statutory Requirements		Validation of Compliance	
Requirement 3  Ref: Regulation 27 (4)(b)	Submit a programme which outlines timescales or details for the implementation of works to provide the revised fire precaution improvements.	Met	
	Action taken as confirmed during the inspection: Works completed.		

# 5.2 Standard 29: Fire Safety

A range of fire protection measures are in place for the premises. These have been enhanced by a range of additional measures which have been provided in the home over the past year intended to compensate for the height of the building which has four storeys above ground floor level. The registered provider and the fire safety advisor/fire risk assessor had consulted with the Northern Ireland Fire and Rescue Services (NIFRS) and designed a package of measures including:

- a dry riser installation
- improved fire compartmentation
- fire alarm and detection system upgraded to analogue addressable
- improvements to the emergency lighting installation
- improvements to the gas supply services
- provision of smoke evacuation measures
- associated redecoration works

During the inspection, the commissioning documentation relating to the above works was presented as well as Local Authority Building Control completion certification.

Also presented during the inspection was documentation relating to the servicing of the:

- fire alarm and detection system
- emergency lighting system
- fixed wiring installation
- electrical equipment

All the above documentation appeared to be in order. This supports the delivery of safe care.

One issue was identified for attention during this Estates inspection. This is detailed in the 'Areas for Improvement' section below.

#### **Areas for Improvement**

1. The manager confirmed during the inspection that the local NIFRS had agreed to attend the home at a date to be arranged in order that their records relating to the home could be updated to take account of the revised fire safety arrangements and so that fire fighters could familiarise themselves with these. Refer to recommendation 1 in attached Quality Improvement Plan.

Number of Requirements	0	Number Recommendations:	1
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### 6. Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Dawn Fullerton, Home 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 <a href="mailbox@rqia.org.uk">estates.mailbox@rqia.org.uk</a> 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	Provide confirmation that the Northern Ireland Fire and Rescue Service have attended the home and taken account of the revised fire safety				
Ref: Standard 29.3	arrangements.				
Stated: First time	Response by Registered Manager Detailing the Actions Taken: I have contacted NIFRS and an SOP 12 visit has been arranged for 26/05/16.				
To be Completed by: Timescale to be determined by NIFRS	Following this visit the local NIFRS will visit the home as a training exercise and update and familiarise themselves with the revised fire safety arrangements				
Registered Manager Completing QIP		Dawn Fullerton	Date Completed	13/05/16	
Registered Person Approving QIP		Lexie Duncan	Date Approved	13/05/16	
RQIA Inspector Assessing Response		P Cunningham	Date Approved	13/5/16	