

THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY

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ANNOUNCED ESTATES INSPECTION

Inspection No: 17910

Establishment ID No: 1327

Name of Establishment: Innisfree

Date of Inspection: 12 June 2014

Inspector's Name: Gavin Doherty

1.0 GENERAL INFORMATION

Name of Home:	Innisfree	
Address:	110 Bucna Road Broughshane BT42 4NR	
Telephone Number:	028 2568 4497	
Registered Organisation/Provider:	Mrs Shauna Anne Stanford	
Registered Manager:	Mrs Shauna Stanford	
Person in Charge of the Home at the time of Inspection:	Mrs Shauna Stanford	
Other person(s) consulted during inspection:	Mr Clarke Stanford	
Type of establishment:	Residential Care Home	
Number of Registered Places:	28 RC-I,RC-LD, RC-PH, RC-PH (E), RC-DE	
Date and time of inspection:	12 June 2014 from 10:30-13:00	
Date of previous estates inspection:	31 May 2011	
Name of Inspector:	Gavin Doherty	

2.0 INTRODUCTION

The Regulation and Quality Improvement Authority (RQIA) is empowered under The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 to inspect residential care homes.

This is a report of an announced inspection to assess the quality of the premises and grounds in which the service is being provided including the upkeep of the building and engineering services and equipment. The report details the extent to which the standards measured during inspection were met.

3.0 PURPOSE OF THE INSPECTION

The purpose of this inspection was to consider whether the premises and grounds were safe, well maintained and remain suitable for their stated purpose in compliance with legislative requirements and current minimum standards. This was achieved through a process of evaluation of available evidence.

The Regulation and Quality Improvement Authority aims to use inspection to support providers in improving the quality of services, rather than only seeking compliance with regulations and standards.

The aims of the inspection were to examine the estates related policies, practices and monitoring arrangements for the provision of Residential Care homes, and to determine the provider's compliance with the following:

- HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003
- Residential Care Homes Regulations (Northern Ireland) 2005
- Residential Care Homes Minimum Standards (DHSSPS, 2011)

Other published standards which guide best practice may also be referenced during the Inspection process.

4.0 METHODS/PROCESS

Specific methods/processes used in this inspection include the following:

- Discussion with the person in charge
- Examination of records
- Inspection of the home internally and externally. Residents' private bedrooms were only inspected when unoccupied and permission was granted.
- Evaluation and feedback

Any other information received by RQIA about this Registered Establishment has also been considered by the Inspector in preparing for this inspection.

5.0 CONSULTATION PROCESS

During the course of the inspection, the Inspector spoke to Mrs Shauna Stanford, registered manager for the home and Mr Clarke Stanford who dealt with issues related to the premises.

6.0 INSPECTION FOCUS

The inspection sought to establish the level of compliance achieved with respect to the following DHSSPS Residential Care Homes Minimum Standards and to assess progress with the issues raised during and since the previous inspection:

Standards inspected:

- Standard 27 Premises and grounds
- Standard 28 Safe and healthy working practices
- Standard 29 Fire Safety

7.0 SUMMARY

Following the Estates Inspection of Innisfree on 12 June 2014 improvements are required to comply with the Residential Care Homes Regulations (Northern Ireland) 2005 and the criterion outlined in the following standards:

- Standard 28 Safe and healthy working practices
- Standard 29 Fire Safety

This resulted in four requirements and two recommendations. These are outlined in the following section, and the quality improvement plan appended to this report.

The Estates Inspector would like to acknowledge his gratitude to Mrs Shauna Stanford and the staff of the home for their hospitality and assistance throughout the inspection process.

8.0 INSPECTOR'S FINDINGS

- 8.1 Recommendations and requirements from previous inspection
- 8.1.1 It was good to note that the issues raised in the report of the previous estates inspection on 31 May 2011 had been fully addressed.
- **8.2 Standard 27 Premises and grounds -** *The premises and grounds are safe, well maintained and remain suitable for their stated purpose*
- 8.2.1 There was good evidence of maintenance activities throughout the home and the home continues to be kept very clean and is maintained to a high standard internally and externally. This is to be commended. Maintenance procedures for the building and engineering services were reviewed and all appeared to be in order. On-going improvements to the home include the recent fitting of radiator covers to existing radiators were there was a burn risk to residents.
- 8.2.2 No requirements or recommendations were therefore required against this standard as a result of this inspection.
- **8.3** Standard 28 Safe and healthy working practices The home is maintained in a safe manner
- 8.3.1 By in large, safe and healthy working practices appear evident throughout the home in accordance with this standard. The electrical systems are well maintained and portable appliance testing is undertaken on an annual basis and no failures have been reported. The fixed electrical installation was inspected on 24 July 2013 following a major extension to the home. Remedial works were undertaken at this time in the existing home, and the system was left in a 'satisfactory' condition. The nurse call system is suitably maintained and monthly checks of the same are in place. The home was inspected by the local council's environmental health department on 24 July 2012 and was awarded the maximum score of 5 at this time.
- 8.3.2 However, several issues were identified for attention by the registered person during this inspection. These are detailed below and in the section of the attached quality improvement plan titled 'Standard 28 Safe and healthy working practices'.
- 8.3.3 It is essential that the thermostatic mixing valves installed in the home are serviced and maintained in accordance with the manufacturer's instructions. Records should be maintained and be available within the home for inspection. (Item 1 in the attached Quality Improvement Plan)

- 8.3.4 It is important that the current monitoring of the outlet temperatures at the 'thermostatic mixing valves' fitted throughout the home is increased to ensure that all such valves have their temperatures checked on a regular basis. Records of these checks should be maintained and be available for inspection within the home. (Item 2 in the attached Quality Improvement Plan)
- 8.3.5 A risk assessment was undertaken on 30 November 2013 with regards to the 'Control of legionella bacteria in the home's hot and cold water systems'. As a result of this risk assessment suitable control measures have been implemented throughout the home. However, it is noted that no records were presented for the temperature checks at the home's Calorifiers (Hot water storage tanks) and at the cold water storage tank. It is essential that all the control measures highlighted in this risk assessment are fully implemented and maintained. Records should also be maintained and available for inspection within the home.

If required, detailed advice on each control measure should be sought from the author of the risk assessment.

Detailed advice has also been recently published by the Health and Safety Executive in the form of 'HSG274 - Part 2: The control of legionella bacteria in hot and cold water systems', and this can be freely downloaded at the following address: http://www.hse.gov.uk/pubns/priced/hsg274part2.pdf (Item 3 in the attached Quality Improvement Plan)

- 8.3.6 Ensure that the local exhaust ventilation system in the main Kitchen undergoes suitable thorough examination, cleaning and testing, at least once every 14 months, and in accordance with the 'Control of Substances Hazardous to Health Regulations (COSHH) 2002', Regulation 9 'Maintenance, examination and testing of control measures'.

 (Item 4 in the attached Quality Improvement Plan)
- 8.3.7 Guidance and advice should be sought from the supplier of the recently installed 'Standby electrical generator', as to the maintenance and testing procedures recommended or required, to ensure the generator performs as required in the case of a mains electrical failure. Any such requirements or recommendations should be fully implemented and maintained. Records should also be maintained and available for inspection within the home. (Item 5 in the attached Quality Improvement Plan)

- **8.4 Standard 29: Fire safety -** Fire safety precautions are in place that reduce the risk of fire and protect residents, staff and visitors in the event of fire.
- 8.4.1 Fire Safety procedures in the home are, in the main, generally in line with this standard. The fire alarm and detection system, emergency lighting installation and portable fire-fighting equipment are suitably serviced, inspected and maintained in line with current best practice. A fire drill was carried out within the home on 11 June 2014, and fire safety training was provided to staff in September 2013 and again in May 2014. This training was delivered by the home's fire risk assessor. A review of the homes' fire risk assessment was undertaken on the 9 July 2013 and the significant findings flowing from this report have been implemented and signed-off accordingly by the manager.
- 8.4.2 One issue was identified for attention by the registered manager as a result of this inspection. This is detailed below and in the section of the attached quality improvement plan titled 'Standard 29 Fire Safety'.
- 8.4.3 It is recommended that the annual reviews of the fire risk assessment should be carried out by a person or a company certified by a third party UKAS accredited certification body or a person who is registered with one of the fire safety professional bodies. Reference should be made to correspondence issued by RQIA to all Registered Persons on 13 January 2013 and the following guidance contained therein:

http://www.rqia.org.uk/what we do/registration inspection and reviews /service_provider_guidance/fire_safety_information.cfm (Item 6 in the attached Quality Improvement Plan)

9.0 QUALITY IMPROVEMENT PLAN

The details of the Quality Improvement Plan appended to this report were discussed with Mrs Shauna Stanford as part of the inspection process.

The timescales commence from the date of inspection.

Requirements are based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 and The Residential Homes Regulations (Northern Ireland) 2005 and must be met.

Recommendations are based on the Department of Health, Social Services and Public Safety's minimum standards for registration and inspection, promote current good practice and should be considered by the management of the home to improve the quality of life experienced by residents.

The registered provider is required to record comments on the quality improvement plan.

10.0 Enquiries

Enquiries relating to this report should be addressed to:

Regulation and Quality Improvement Authority 9th Floor Riverside Tower 5 Lanyon Place BELFAST BT1 3BT

Gavin Doherty Estates Inspector

11 July 2014

Date



Quality Improvement Plan

Announced Estates Inspection

Innisfree

12 June 2014

QIP Position Based on Comments from Registered Persons (for RQIA use only)		QIP Closed		Estates Officer	Date	
			Yes	No		
A.	All items confirmed as addressed.					
B.	All items either confirmed as addressed or arrangements confirmed to address within stated timescales.					
C.	Clarification or follow up required on some items.					

NOTES:

The details of the quality improvement plan were discussed with Mrs Shauna Stanford as part of the inspection process.

The timescales commence from the date of inspection.

Requirements are based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 and The Residential Care Homes Regulations (Northern Ireland) 2005 and must be met.

Recommendations are based on the Department of Health, Social Services and Public Safety's minimum standards for registration and inspection, promote current good practice and should be considered by the management of the residential home to improve the quality of life experienced by residents.

The registered provider is required to record comments on the quality improvement plan.

The quality improvement plan is to be signed below by the registered provider and registered manager and returned to:

The Regulation and Quality Improvement Authority 9th Floor Riverside Tower 5 Lanyon Place BELFAST BT1 3BT

SIGNED:		SIGNED:		
NAME: (print)	REGISTERED PROVIDER	NAME: (print)	REGISTERED MANAGER	
DATE:		DATE:		

Announced Estates Inspection to Innisfree Residential Care Home on 12 June 2014

Assurance, Challenge and Improvement in Health and Social Care

Standard 28 – Safe and healthy working practices

The following requirements and recommendations should be noted for action in relation to Standard 28 – Safe and healthy working practices

Item	Regulation Reference	Requirement	Timescale	Details Of Action Taken By Registered Person (s)
1	Regulation 27 (2)(q) 14 (2)(a)(c)	Ensure that the thermostatic mixing valves installed in the home are serviced and maintained in accordance with the manufacturer's instructions. Records should be maintained and be available within the home for inspection. (Refer to 8.3.3 in the report)	8 Weeks	
2	Regulation 27 (2)(q) 14 (2)(a)(c)	Ensure that the current monitoring of the outlet temperatures at the 'thermostatic mixing valves' fitted throughout the home is increased to ensure that all valves have their temperatures checked on a regular basis. Records of these checks should be maintained and be available for inspection within the home. (Refer to 8.3.4 in the report)	Immediate & on-going	
3	Regulation 27 (2)(q) 14 (2)(a)(c)	Ensure that all control measures flowing from the 'Control of legionella bacteria in the hot and cold water systems' risk assessment are fully implemented and maintained, with records maintained and available for inspection. (Refer to 8.3.5 in the report)	Immediate & Ongoing	

Announced Estates Inspection to Innisfree Residential Care Home on 12 June 2014

Item	Regulation Reference	Requirement	Timescale	Details Of Action Taken By Registered Person (s)
4	Regulation 27 (2)(q) 14 (2)(a)(c)	Ensure that the local exhaust ventilation system in the main Kitchen undergoes suitable thorough examination, cleaning and testing in accordance with the 'Control of Substances Hazardous to Health Regulations (COSHH) 2002'. (Refer to 8.3.6 in the report)	12 Weeks	

Standard 28 – Safe and healthy working practices

The following requirements and recommendations should be noted for action in relation to Standard 28 – Safe and healthy working practices

Item	Standard Reference	Recommendation	Timescale	Details Of Action Taken By Registered Person (s)
5	Standard 28.2	Guidance and advice should be sought from the supplier of the recently installed 'Standby electrical generator', as to the test procedures recommended or required, to ensure the generator performs as required in the case of a mains electrical failure. Any such requirements or recommendations should be fully implemented and maintained. Records should also be maintained and available for inspection within the home. (Refer to 8.3.7 in the report)	Immediate & On-going	

Announced Estates Inspection to Innisfree Residential Care Home on 12 June 2014

Standard 29 - Fire Safety

The following requirements and recommendations should be noted for action in relation to Standard 29 – Fire Safety

Item	Standard Reference	Recommendation	Timescale	Details Of Action Taken By Registered Person (s)
6	Standard 29.5	It is recommended that the annual review of the fire risk assessment is carried out by a person or a company certified by a third party UKAS accredited certification body or a person who is registered with one of the fire safety professional bodies. (Refer to 8.4.3 in the report)	Upon review of the Fire Risk Assessment	