

THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY 9th floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT Tel: 028 9051 7500 Fax: 028 9051 7501

ANNOUNCED ESTATES INSPECTION

- Inspection No: 16754
- Establishment ID No: 1341
- Name of Establishment: Andena
- Date of Inspection: 28 July 2014
- Inspector's Name: Raymond Sayers

1.0 GENERAL INFORMATION

Andena			
206-208 Ballymoney Rd Ballymena BT43 5HG			
02825644767			
Mr James Joseph McConville			
Ms Christina Ann Shields			
Ms Christina Ann Shields			
Mr Alan Shields			
Residential Home			
36			
28 July 2014 from 10.00 – 13.00hrs			
2 August 2011			
Raymond Sayers			

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:

- The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003;
- The 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 Mr Alan Shields (Maintenance Manager) and Mrs Christina Shields (Manager);
- 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 regulated 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 Ms Christina Ann Shields and Mr Alan Shields.

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 PROFILE OF SERVICE

Andena Private Residential Home is a purpose built home which was first registered on 18 December 2002 to accommodate 36 residents. The home is situated close to Ballymena town centre and is near to parks, shops and other amenities in an established residential area with adequate off road parking and is surrounded by landscaped areas.

The home is a two storey building with wide staircase access to each floor and a passenger lift for those unable to use the stairs. The ground floor of Andena has two spacious lounges, a dining room, kitchen, office and two rooms for visitors or professionals to use as well as a laundry room and a ground floor bathroom and WCs. In total there are 32 single and two double bedrooms, 11 of the single bedrooms are on the ground floor. The second floor has 21 single bedrooms, two double bedrooms, two bathrooms, WCs and staff room on the first floor of the home. All of the bedrooms are en-suite with a toilet and sink.

8.0 SUMMARY

Following the Estates Inspection of Andena on 28 July 2014 improvements are required to comply with the Residential Care Homes Regulations (Northern Ireland) 2005 and the criteria outlined in the following standards:

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

The inspection resulted in three requirements and two recommendations, listed in the quality improvement plan appended to this report.

The interior finishes are well maintained, some building services periodic maintenance verification certificates were not available for examination.

The Estates Inspector would like to acknowledge the assistance of Ms Christina Ann Shields and Mr Alan Shields during the inspection process.

9.0 INSPECTOR'S FINDINGS

9.1 Recommendations and requirements from previous inspection

- 9.1.1 It is noted that some issues listed in the report of the previous estates inspection on 2 August 2011 have been addressed. Several issues require further attention and are restated in the relevant sections of the attached quality improvement plan sub-titled 'restated recommendations/requirements'.
- 9.1.2 "Verify that the Periodic Inspection Report for the electrical installation is currently valid and compliant with BS7671."
 (Reference: Quality Improvement Plan Item 1)
- 9.1.3 "Complete a legionellosis risk assessment and verify that control measures implemented are compliant with L8 approved code of practice and guidance." (Reference: Quality Improvement Plan Item 2)
- 9.1.4 "Verify that an annual BS5266 emergency lighting system maintenance inspection/test is completed by a competent person." (Reference: Quality Improvement Plan Item 4)
- **9.2** Standard 27 Premises and grounds The premises and grounds are safe, well maintained and remain suitable for their stated purpose
- 9.2.1 There was evidence of maintenance activities and procedures, there were no issues listed as requiring corrective/improvement works to comply with the listed standard.
- **9.3** Standard 28 Safe and healthy working practices The home is maintained in a safe manner
- 9.3.1 Safe and healthy working practices are evident in the home in compliance with this standard, although some issues have been identified for attention by the registered person. Items requiring corrective/improvement action by the registered person are detailed in report paragraphs 9.3.2 9.3.4, and in the attached Quality Improvement Plan section titled '**Standard 35 Safe and healthy working practices'.**

- 9.3.2 A BS7671 Periodic Inspection Report for the electrical installation was not presented for examination. Mr Shields stated that the electrician had completed an inspection but the certificate was currently not available on site. (Reference: Quality Improvement Plan Item 1)
- 9.3.3 A schedule/inventory of portable electrical appliances was not available for examination although individual electrical appliances did display Portable Appliance Test labels.
 (Reference: Quality Improvement Plan Item 3)
- 9.3.4 Mr Shields states that there is no potable water storage provision on the premises and that the water supply is direct from the mains. Records presented verify that shower heads are cleaned and sterilized quarterly; last recorded sterilization 4 July 2014. A legionella risk assessment was not available for examination. (Reference: Quality Improvement Plan Item 2)
- 9.3.5 Mr Shields states that in the event of an electrical power outage then arrangements were in place to have a portable generator connected to the homes electrical system.
- **9.4 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.*
- 9.4.1 Fire Safety procedures are completed in the home and a fire risk assessment review was completed in April 2013; maintenance engineer service records were available for examination. Issues requiring corrective action by the registered person are detailed in report paragraphs 6.4.2, 6.4.3 and the section of the attached quality improvement plan titled '**Standard 36: Fire safety'.**
- 9.4.2 The last fire risk assessment was completed in April 2013; a 30 November 2013 dated confirmation letter signed by the Registered Person stated that the recommended controls/improvements had been implemented. (Reference: Quality Improvement Plan Item 5)

10.0 QUALITY IMPROVEMENT PLAN

The details of the Quality Improvement plan appended to this report were discussed with Ms Christina Ann Shields 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.

11.0 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

Raymond Sayers Estates Officer

8 August 2014

Date

NOTES:

The details of the quality improvement plan were discussed with Error! Reference source not found. and Mr Alan Shields during 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 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:

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BELFAST	- The second		
BT1 3BT			
SIGNED:	Jula	SIGNED:	CHRICFING SHIGLDS
NAME: (print)	AVAN SHIFLDS.	NAME: (print)	REGISTERED MANAGER
DATE:	17.11-14	DATE:	

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Assurance, Challenge and Improvement in Health and Social Care

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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

ltem	Regulation Reference	Restated Requirements	Timescale	Details Of Action Taken By Registered Person (S)
1	Regulations 14 (2)(a),(b) & (c)	"Verify that the Periodic Inspection Report for the electrical installation is currently valid and compliant with BS7671." (Reference: Report paragraphs 9.1.2 & 9.3.2)	8 weeks	Completed
2	Regulations 14 (2)(a),(b) & (c)	"Complete a legionellosis risk assessment and verify that the control measures implemented are compliant with L8 approved code of practice and guidance." (Reference: Report paragraphs 9.1.3 & 9.3.4)	8 weeks	Completed
ltem	Standard Reference	Recommendations	Timescale	Details Of Action Taken By Registered Person (S)
3	Standard 28.1	Record Portable Appliance Test details on an electrical appliances inventory. (Reference: Report paragraph 9.3.3)	8 weeks	Completed

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

ltem	Regulation Reference	Restated Requirements	Timescale	Details Of Action Taken By Registered Person (S)
4.	Regulations 27.(4)(c),(d)(iii),(iv) & (v)	"Verify that an annual BS5266 emergency lighting system maintenance inspection/test is completed by a competent person." (Reference: Report paragraph 9.3.3)	8 Weeks	Completed
Item	Standard Reference	Recommendations	Timescale	Details Of Action Taken By Registered Person (S)
5.	Standard 29.1	It is recommended that the annual review 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: <u>http://www.rqia.org.uk/cms_resources/Compete</u> <u>nce%20of%20persons%20carryIng%20out%20F</u> <u>ire%20Risk%20Assessment.pdf</u> (Reference: Report paragraph 9.4.2)	8 Weeks	We had this report done by W.Y.G and all recommendations carried out. As you could see from your inspection that no extensions or modifications had been done to the building. All monthly inspections are carried out and I carried out ou annual inspection. It said on the W.Y.G. report that this could be done by a competent person. With 40yrs. in both building & civil engineering and a hands on owner I am competent to carry out this task. (Alan Shields).

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