



The Regulation and
Quality Improvement
Authority

**THE REGULATION AND QUALITY IMPROVEMENT
AUTHORITY**

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ANNOUNCED ESTATES INSPECTION

Inspection No:	17905
Establishment ID No:	1342
Name of Establishment:	Benbradagh
Date of Inspection:	7 May 2014
Inspector's Name:	Gavin Doherty

1.0 GENERAL INFORMATION

Name of Home:	Benbradagh
Address:	59 Tirgarvil Road Upperlands Maghera BT46 5UW
Telephone Number:	028 7964 2238
Registered Organisation/Provider:	Mr Chris Vijendra Ramrachia Mrs Shirley Ann Ramrachia
Registered Manager:	Mr Chris Ramrachia
Person in Charge of the Home at the time of Inspection:	Mr Chris Ramrachia
Other person(s) consulted during inspection:	N/A.
Type of establishment:	Residential Care Home
Number of Registered Places:	22 RC-I, RC-MP/RC-MP(E), RC-DE, RC-SI
Date and time of inspection:	7 May 2014 from 10:30-13:00
Date of previous 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 Provider 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 Mr Chris Ramrachia, registered manager for Benbradagh residential care home.

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 Benbradagh on 7 May 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 six requirements and no 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 Mr Chris Ramrachia 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 any 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. This is to be commended. Maintenance procedures for the building and engineering services were inspected and all appeared to be in order.

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 27 – Premises and grounds**'.

- 8.2.2 The external front façade of the original home was in poor decorative condition with flaking paint and damaged timbers. This façade should be made good at the earliest opportunity. (Item 1 in the attached Quality Improvement Plan)

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 in-house on a regular basis and no failures have been reported. The fixed electrical installation was inspected on 26 July 2012. Remedial works were undertaken at this time 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 officer on 6 April 2014 and was awarded the maximum score of 5 at this time.

Four issues were however identified for attention by the registered manager as a result of this inspection. These are detailed below and in the section of the attached quality improvement plan titled '**Standard 28 – Safe and healthy working practices**'.

- 8.3.2 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 2 in the attached Quality Improvement Plan)

- 8.3.3 A risk assessment was undertaken on 15 October 2012 with regards to the 'Control of legionella bacteria in the home's hot and cold water systems'. It is important that all the control measures required as a result of this risk assessment are fully implemented and maintained. Records should also be maintained and available for inspection. 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)

- 8.3.4 Hot surfaces within the home should be risk assessed with regards to a resident being scalded. Where an unacceptable risk is identified then suitable controls should be implemented to mitigate or remove this risk. (Item 4 in the attached Quality Improvement Plan)

- 8.3.5 Several windows on the first floor in the original section of the home were not suitably restricted. It is essential that each window opening within the home is assessed and that if not already restricted, it should be controlled to a safe point of opening of no more than 100mm by a means which cannot be overridden by residents. (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 30 January 2014, and fire safety training was provided to staff on 30 January 2014 also. This training was delivered by the home's fire risk assessor. A review of the homes' fire risk assessment was undertaken on the 4 June 2013 and the significant findings flowing from this report have been implemented and signed-off accordingly.

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**'.

8.4.2 It was good to observe that the home have purchased door closers for the bedroom doors and these were in the process of being fitted at the time of the inspection. This is to be commended. However, it is important that a suitable risk assessment is carried out for each resident's bedroom to ensure that the self-closing device provided does not impact adversely on the mobility, safety or quality of life of the individual resident.
(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 Mr Chris Ramrachia 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**



Quality Improvement Plan sign off sheet for estates inspectors

Name of Home	Benbradagh
Date of Inspection	7 May 2014
Name of Inspector	Gavin Doherty

QIP Position Based on Comments from Registered Persons			QIP Closed		Estates Officer	Date
			Yes	No		
A.	All items confirmed as addressed.		✓		Gavin Doherty	20/8/2014
B.	All items either confirmed as addressed or arrangements confirmed to address within stated timescales.					
C.	Clarification or follow up required on some items.					

Estates Inspection – QIP sign off sheet

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NOTES:

The details of the quality improvement plan were discussed with Mr Chris Ramrachia 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 completed by the registered provider and registered manager and returned to estates@rqia.org.uk.

Please complete the following table to demonstrate that this Quality Improvement Plan has been completed by the registered manager and approved by the responsible person / identified responsible person:

NAME OF REGISTERED MANAGER COMPLETING QIP	Chris Ramrachia
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	Shirley Ramrachia

Announced Estates Inspection to Benbradagh Residential Care Home on 7 May 2014

Assurance, Challenge and Improvement in Health and Social Care

Standard 27 – Premises and Grounds

The following requirements and recommendations should be noted for action in relation to Standard 27 – Premises and grounds

Item	Regulation Reference	Requirement	Timescale	Details Of Action Taken By Registered Person (s)
1	Regulation 27 (2)(b)(d)	The external front façade of the original home was in poor decorative condition with flaking paint and damaged timbers. This façade should be made good at the earliest opportunity. (Refer to 8.2.2 in the report)	20 Weeks	Acknowledged. The painting of the front of the building has stated and anticipated to be completed by the end of July 2014..

Announced Estates Inspection to Benbradagh Residential Care Home on 7 May 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)
2	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 8.3.2 in the report)	8 Weeks	Acknowledged. All bathrooms and showers thermostatic valves has been serviced and will form part of our services and maintenance schedule annually.
3	Regulation 27 (2)(q) 14 (2)(a)(c)	<p>Ensure that the control measures required as a result of the risk assessment for the 'Control of legionella bacteria in the home's hot and cold water systems' are fully implemented and maintained. Records should also be maintained and available for inspection.</p> <p>Detailed advice recently published by the Health and Safety Executive in the form of 'HSG274 - Part 2, can be freely downloaded at the following address: http://www.hse.gov.uk/pubns/priced/hsg274part2.pdf (Refer to 8.3.3 in the report)</p>	Immediate & Ongoing	Acknowledged. The hot and cold water systems are checked weekly and record are maintain which also include unoccupied rooms and isolated water outlets . A separate sheets will be included in our maintain records for future inspection..
4	Regulation 27 (2)(q) 14 (2)(a)(c)	Ensure that all hot surfaces within the home are risk assessed with regards to a resident being scalded. Where an unacceptable risk is identified, suitable controls should be implemented to mitigate or remove this risk (Refer to 8.3.4 in the report)	8 Weeks	Acknowledged. Risks assessment were carried immediately after inspection and there are no unacceptable risk identified. However Risks assessment will be carried out periodically and a records will maintained.

Announced Estates Inspection to Benbradagh Residential Care Home on 7 May 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)
5	Regulation 14 (2)(a)(c)	Ensure that each window opening within the home is assessed and that if not already restricted, it should be controlled to a safe point of opening of no more than 100mm by a means which cannot be overridden by residents. (Refer to 8.3.5 in the report)	4 Weeks	Acknowledge. All windows opening was checked and two safety point of the opening was repaired. Periodical check will be recorded and maintained

Announced Estates Inspection to Benbradagh Residential Care Home on 7 May 2014

Assurance, Challenge and Improvement in Health and Social Care

Standard 29 – Fire Safety

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

Item	Regulation Reference	Requirement	Timescale	Details Of Action Taken By Registered Person (s)
6	Regulation 27 (4)(b)	Ensure that the purchased door closers for the bedroom doors are fitted without undue delay. It is important that a suitable risk assessment is carried out for each resident's bedroom to ensure that the self-closing device provided does not impact adversely on the mobility, safety or quality of life of the individual resident. (Refer to 8.4.2 in the report)	12 Weeks	Acknowledge. Door closures has already fitted to 21 rooms. However work is in progress and anticipated by the end July 2014 all rooms will be fitted with door closure.

Announced Estates Inspection to Benbradagh Residential Care Home on 7 May 2014

Assurance, Challenge and Improvement in Health and Social Care