



**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:	17984
Establishment ID No:	1346
Name of Establishment:	Glens Residential Care Home
Date of Inspection:	13 May 2014
Inspector's Name:	Colin Muldoon

1.0 GENERAL INFORMATION

Name of Home:	Glens Residential Care Home
Address:	63 Middlepark Road, Cushendall. BT44 0SQ
Telephone Number:	028 2177 1588
Registered Organisation/Provider:	Glens Ms Paula Magee
Registered Manager:	Ms Geraldine Magee
Person in Charge of the Home at the time of Inspection:	Ms Paula Magee and Ms Geraldine Magee
Other person(s) consulted during inspection:	Ms Paula Magee
Type of establishment:	Residential Care Home
Categories of Care	RC-I, RC-MP, RC-MP(E), RC-PH, RC-PH(E)
Number of Registered Places:	16
Date and time of inspection:	13 May 2014 10.30 – 13.05
Date of Previous Estates inspection	23 June 2011
Name of Inspector:	Colin Muldoon

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 unannounced 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 Ms Paula Magee and Ms Geraldine Magee.
- 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 Ms Paula Magee and Ms Geraldine Magee.

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 Estates inspection on 23 June 2011:

Standards inspected:

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

7.0 PROFILE OF SERVICE

The Glens Residential Care Home is a detached single storey building in a residential area on the outskirts of Cushendall. Over the last few years there has been a program of upgrade which has included the refurbishment of bath and shower rooms, the addition of a large bright sitting room, improved staff facilities, improvements to kitchen and laundry and refurbishment of outdoor space.

There is parking space at the front of the home.

8.0 SUMMARY

There was good evidence of maintenance activities and the home appeared well presented, comfortable and homely.

Following the Estates Inspection of Glens Residential Care Home on 13 May 2014 improvements are required to comply with the Residential Care Homes Regulations (Northern Ireland) 2005 and the criteria outlined in the following standards:

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

This resulted in five requirements. These are outlined in the Quality Improvement Plan appended to this report.

The Estates Inspector would like to acknowledge the assistance of Ms Paula Magee and Ms Geraldine Magee during the inspection process.

9.0 INSPECTOR'S FINDINGS

9.1 **Recommendations and requirements from previous inspection**

It is good to note that action has been taken on issues raised during the previous Estates inspection on 23 June 2011. One matter requires further attention.

- 9.1.1 Item 1 in the report of the Estates inspection on 23 June 2011 required that:
A system should be established for the monitoring of Medical Device and Equipment Alerts. All monitoring and follow up activity should be logged.
(Item 2 in Quality Improvement Plan)

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 At present there is no arrangement for the thermostatic mixing valves to be maintained.
(Item 1 in Quality Improvement Plan)

The issue identified for attention in relation to this standard is detailed in the section of the attached Quality Improvement Plan titled '**Standard 27 - Premises and grounds**'.

9.3 **Standard 28 - Safe and healthy working practices - *The home is maintained in a safe manner***

- 9.3.1 The home has a policy regarding legionella and there are procedures in place towards the control of legionella. A legionella risk assessment should be carried out. On 20 May 2014 the inspector emailed the home a copy of the Health and Safety Executive document HSE L8 HSG274 Part 2: *The control of legionella bacteria in hot and cold water systems*.
(Item 3 in Quality Improvement Plan)

The issues identified for attention in relation to this standard are detailed in the section of the attached Quality Improvement Plan titled '**Standard 28: Safe and healthy working practices**'.

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.*

The home has a current fire risk assessment. The assessor considers the overall fire risk to be trivial.

9.4.1 The fire detection and alarm system was maintained on 08 May 2014. The current arrangement is for servicing to be carried out once annually. This was discussed in relation to the relevant code of practice.
(Item 4 in Quality Improvement Plan)

9.4.2 During the walk round it was observed that the closer on the door from the dining room into the main hall was not working correctly.
(Item 5 in Quality Improvement Plan)

The issues identified for attention in relation to this standard are detailed in the section of the attached Quality Improvement Plan titled '**Standard 29: Fire safety**'.

10.0 QUALITY IMPROVEMENT PLAN

The details of the Quality Improvement Plan appended to this report were discussed with Ms Paula Magee and Ms Geraldine Magee 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:

**Colin Muldoon
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	Glens RH
Date of Inspection	13 May 2014
	C Muldoon

QIP Position Based on Comments from Registered Persons			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 Muldoon	11/07/2014
C.	Clarification or follow up required on some items.					

Estates Inspection – QIP sign off sheet

Informing and Improving Health and Social Care

NOTES:

The details of the Quality Improvement Plan were discussed with Ms Paula Magee and Ms Geraldine Magee 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 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	Geraldine Magee
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	Paula Magee

Announced Estates Inspection to Glens Residential Care Home 13 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	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
1	Regulation 27.-(2)(q)	The thermostatic mixing valves should be serviced, set and fail safe tested in accordance with the manufacturer's instructions. (Item 9.2.1 in report)	1 Month and ongoing	Manufacturer's instruction's have been obtained and checks are now being carried out and recorded by Alastair.

Announced Estates Inspection to Glens Residential Care Home 13 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	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
2	Regulation 14.-(2)(c)	A system should be established for the weekly monitoring of Medical Device and Equipment Alerts. All monitoring and follow up activity should be logged (Item 9.1.1 in report)	1 Month	A weekly system for monitoring medical device and equipment alerts is now in place.
3	Regulation 13.-(7) 14.-(2)(a) and (c)	A suitable and sufficient legionella risk assessment should be carried out. The outcome of the assessment should be a scheme for the effective control of legionella. The scheme should be fully implemented. Records should be kept of all actions relating to the control of legionella. Reference should be made to the current version of the Health and Safety Executive Approved Code of Practice L8 <i>Legionnaires' disease - The control of legionella bacteria in water systems</i> and the technical guidance to the ACoP <i>HSG274 Part 2</i> (Item 9.3.1 in report)	2 Months	After receiving more information and getting more advise we are now developing a more detailed legionella risk assessment. This is in process and will be completed within the next few weeks.

Announced Estates Inspection to Glens Residential Care Home 13 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	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
4	Regulation 27.-(4)(d)(iv) and (v)	The fire detection and alarm system should be maintained at periods not exceeding six months. Quarterly maintenance is recommended. Reference should be made to BS 5839 (Item 9.4.1 in report)	6 Months and ongoing	This is ongoing and is in the dairy for when it is due again.
5	Regulation 27.-(4)(c) 27.-(4)(d)(i)	The fault with the closer on the dining room door should be investigated and repaired. (P and G Magee undertook to have the closer repaired on the day of inspection) (Item 9.4.2 in report)	Immediate	This was reported on the day and a new part has been ordered.

Announced Estates Inspection to Glens Residential Care Home 13 May 2014

Assurance, Challenge and Improvement in Health and Social Care