



The Regulation and  
Quality Improvement  
Authority

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**Announced Estates Inspection  
of  
Ellis Court Respite Unit**

**20 October 2015**

The Regulation and Quality Improvement Authority  
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Tel: 028 9051 7500 Fax: 028 9051 7501 Web: [www.rqia.org.uk](http://www.rqia.org.uk)

## 1. Summary of Inspection

An announced Estates inspection took place on 20 October 2015 from 10.30 to 14.00. Overall on the day of the inspection the premises supported the delivery of safe, effective and compassionate 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
<b>Total number of requirements and recommendations made at this inspection</b>	5	1

The details of the QIP within this report were discussed with Mrs Rosemary Wray (Registered Manager), Ms Fiona Mills (Deputy Manager) and Mr Conor Sage (Northern Trust Sector Engineering Manager) as part of the inspection process. The timescales for completion commence from the date of inspection.

## 2. Service Details

<b>Registered Organisation/Registered Person:</b> Northern HSC Trust Dr A Stevens	<b>Registered Manager:</b> Mrs Rosemary Wray
<b>Person in Charge of the Home at the Time of Inspection:</b> Mrs Rosemary Wray	<b>Date Manager Registered:</b> 20 February 2013
<b>Categories of Care:</b> RC-LD, RC-LD(E)	<b>Number of Registered Places:</b> 6
<b>Number of Residents Accommodated on Day of Inspection:</b> 6	<b>Weekly Tariff at Time of Inspection:</b> Not applicable

## 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 have been met:

**Standard 27: Premises and Grounds**

**Standard 28: Safe and Healthy working Practices**

**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 and the last care inspection report.

During the inspection the inspector met with Mrs Rosemary Wray (Registered Manager), Ms Fiona Mills (Deputy Manager) and Mr Conor Sage (Northern Trust Sector Engineering Manager).

The following records were examined during the inspection: Copies of service records and in-house log books relating to the maintenance and upkeep of the building and engineering services, legionellae risk assessment, and fire risk assessment.

## 5. The Inspection

### 5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the home was an unannounced care inspection dated 11 June 2015. The completed QIP was returned and approved by the specialist inspector.

## 5.2 Review of Requirements and Recommendations from the last Estates Inspection on 26 August 2014.

Previous Inspection Statutory Requirements		Validation of Compliance
<b>Requirement 1</b>  <b>Ref:</b> Regulations 13 (7) 14 (2)(c)	Carry out investigation and subsequent remedial measures to address the issue of raised water temperature in the cold water distribution system.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> The Trust carried out an investigation as required and subsequently provided details of the remedial work carried out to address the raised cold water temperatures.	
<b>Requirement 2</b>  <b>Ref:</b> Regulations 13 (7) 14 (2)(c)	Carry out disinfection of the domestic hot and cold water services. This should include the parts of the system which are situated outside the respite unit on the first floor office accommodation.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> The Trust confirmed that a specialist contractor carried out cleaning and disinfection of cold water storage tanks (CWST) x 2 and down services, as well as pasteurisation of calorifier and hot water system and that this included all parts of Ellis Court.	
<b>Requirement 3</b>  <b>Ref:</b> Regulations 13 (7) 14 (2)(c)	a) Carry out sampling of the of the domestic hot and cold water services; and  b) provide RQIA with confirmation of test results.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> RQIA were provided with the results of sample testing carried out on 28 August 2014, 16 October 2014 and 31 October 2014. Further samples were tested in February 2015 by the specialist contractor who monitors the legionella control measures. The results were that no legionella was detected in any of these samples. The inspector was informed that the Trust has a protocol to test water samples yearly.	

<b>Requirement 4</b>  <b>Ref: Regulations</b> 13 (7) 14 (2)(c)	Carry out review of the legionellae risk assessment.  <b>Action taken as confirmed during the inspection:</b> A review of the legionella risk assessment was carried out and marked up by Trust Estates staff at the end of August 2014. A further review was carried out by a specialist contractor on 12 November 2014. Mr Sage confirmed that all the recommendations in the latest risk assessment have been addressed.	<b>Met</b>
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### 5.3 Standard 27: Premises and Grounds

#### Is Care Safe? (Quality of Life)

A range of documentation in relation to the maintenance and upkeep of the premises was presented for review during this Estates inspection. This documentation included inspection and test reports for various elements of the engineering services and risk assessments. This supports the delivery of safe care.

A number of issues were however identified for attention during this Estates inspection. These are detailed in the 'areas for improvement' section below.

#### Is Care Effective? (Quality of Management)

A range of accommodation, facilities and support services is provided in the premises. This supports the delivery of effective care.

#### Is Care Compassionate? (Quality of Care)

The areas of the premises reviewed during this Estates inspection were well presented, clean and free from malodours. This supports the delivery of compassionate care.

#### Areas for Improvement

1. During the inspection there were concerns raised about the safety of the hot water in one of the bedrooms. The Trust staff present undertook to investigate this as a matter of urgency. On 21 October it was confirmed to the inspector that a faulty thermostatic mixing valve in this room had been replaced on 05 October and checks to date confirm the new one is working correctly.  
The safety of hot water generally was discussed. There are procedures in place for checking the safe temperature of bath and shower water before each use and for checking the temperature of the water at all other outlets accessible to residents.
2. The home has gas boilers, catering equipment and laundry equipment. On the day of inspection a current Gas Safe certificate was available for the laundry equipment only. Refer to item 1 in Quality Improvement Plan

3. Documentation relating to the last test and inspection of the electrical installation stated that it was in unsatisfactory condition. A number of high priority defects were identified. Refer to item 2 in Quality Improvement Plan.
4. A hot surface risk assessment has been carried out and some matters requiring attention were identified. Refer to item 3 in Quality Improvement Plan.

<b>Number of Requirements</b>	<b>3</b>	<b>Number Recommendations:</b>	<b>0</b>
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#### 5.4 Standard 28: Safe and Healthy Working Practices

##### Is Care Safe? (Quality of Life)

A range of documentation relating to the safe operation of the premises, installations and engineering services was presented for review during this Estates inspection. This supports the delivery of safe care.

##### Is Care Effective? (Quality of Management)

The nature and needs of the residents are considered as part of the risk assessment processes and this is reflected in the management of the home. This supports the delivery of effective care.

##### Is Care Compassionate? (Quality of Care)

There are health and safety procedures and control measures in place which support the delivery of compassionate care.

##### Areas for Improvement

None Identified.

<b>Number of Requirements</b>	<b>0</b>	<b>Number Recommendations:</b>	<b>0</b>
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#### 5.5 Standard 29: Fire Safety

##### Is Care Safe? (Quality of Life)

A range of fire protection measures are in place for the premises. This includes a fire detection and alarm system, emergency lighting, first aid fire-fighting equipment, structural fire separation and protection to the means of escape. This supports the delivery of safe care.

A number of issues were however identified for attention during this Estates inspection. These are detailed in the 'areas for improvement' section below.

##### Is Care Effective? (Quality of Management)

The standard used by the registered person to determine the overall level of fire safety within the premises takes account of the interaction between the physical fire precautions, the fire

hazards, the number of residents, the management policies and the availability of adequately trained staff. This standard has been referenced in the fire risk assessment. This supports the delivery of effective care.

A number of issues were however identified for attention during this Estates inspection. These are detailed in the 'areas for improvement' section below.

### **Is Care Compassionate? (Quality of Care)**

The standard used by the registered persons to determine the extent of fire safety protection measures that are appropriate for the premises recognises the need to maintain a homely, non-institutionalised environment. This supports the delivery of compassionate care.

### **Areas for Improvement**

1. The testing of the fire alarm system has been carried out intermittently. There is a separate alarm system for the first floor non-residential part of the building.  
Refer item 4 in Quality Improvement Plan.
2. Although a number of fire drills have been carried out over the last year it could not be confirmed that all staff have participated.  
Refer to item 5 in Quality Improvement Plan.
3. On the day of inspection it could not be confirmed if the fire risk assessor has the accreditation recommended by RQIA.  
Refer to item 6 in Quality Improvement Plan.

<b>Number of Requirements</b>	<b>2</b>	<b>Number Recommendations:</b>	<b>1</b>
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### **5.6 Additional Areas Examined**

Not applicable.

## 6. Quality Improvement Plan

The issues identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Mrs Rosemary Wray (Registered Manager), Ms Fiona Mills (Deputy Manager) and Mr Conor Sage (Northern Trust Sector Engineering 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 [estates.mailbox@rqia.org.uk](mailto:estates.mailbox@rqia.org.uk) 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

Statutory Requirements	
<p><b>Requirement 1</b></p> <p>Ref: Regulations 27.-(2)(c) 27.-(2)(q)</p> <p><b>Stated:</b> First time</p> <p><b>To be Completed by:</b> <b>20 November 2015</b></p>	<p>It should be confirmed that there are valid Gas Safe certificates which verify that all the gas appliances and their associated pipework installations are in a safe and satisfactory condition.</p> <hr/> <p><b>Response by Registered Manager Detailing the Actions Taken:</b> Please find attached, copies of relevant Gas Safety Reports for Boilers, Catering &amp; Laundry Equipment. With reference to boiler report, rubbish has been removed from Boiler House. With reference to Laundry report, pipe-work has been painted.</p>
<p><b>Requirement 2</b></p> <p>Ref: Regulations 27.-(2)(q) 14.-(2)(a)</p> <p><b>Stated:</b> Second time</p> <p><b>To be Completed by:</b> <b>20 November 2015</b></p>	<p>It should be confirmed that the issues identified during the last test and inspection of the electrical installation have been addressed and that a competent person has verified that the installation is currently in a satisfactory condition.</p> <hr/> <p><b>Response by Registered Manager Detailing the Actions Taken:</b> All C1 items have been addressed from the last Fixed Wire Testing report. A Work order has been issued to the current Measured Term Electrical Contractor to complete all outstanding C2 items. This work will be completed by 11th December 2015.</p>
<p><b>Requirement 3</b></p> <p>Ref: Regulation 14.-(2)(a)</p> <p><b>Stated:</b> First time</p> <p><b>To be Completed by:</b> <b>Ongoing</b></p>	<p>It should be ensured that the issues identified in the hot surface risk assessment are addressed within timescales acceptable to the risk assessor.</p> <hr/> <p><b>Response by Registered Manager Detailing the Actions Taken:</b> All issues identified within the Hot Surface Risk Assessment have been addressed accordingly.</p>
<p><b>Requirement 4</b></p> <p>Ref: Regulation 27.-(4)(d)(v)</p> <p><b>Stated:</b> First time</p> <p><b>To be Completed by:</b> <b>20 November 2015</b></p>	<p>The fire alarm installations for both floors of the building should be function tested weekly in accordance with good practice.</p> <hr/> <p><b>Response by Registered Manager Detailing the Actions Taken:</b> The Registered Manager has directed that the fire alarms on the ground and first floor be function tested weekly and records made of same.</p>

<p><b>Requirement 5</b></p> <p><b>Ref:</b> Regulation 27.-(4)(f)</p> <p><b>Stated:</b> First time</p> <p><b>To be Completed by:</b> 20 November 2015 and ongoing</p>	<p>Arrangements should be made which will ensure that all staff participate in practice fire drills and that records are maintained.</p>		
<p><b>Response by Registered Manager Detailing the Actions Taken:</b> The Registered Manager will ensure that all support staff working in Ellis Court will take part in practice fire drills and relevant records maintained.</p>			
<p><b>Recommendations</b></p>			
<p><b>Recommendation 1</b></p> <p><b>Ref:</b> Standard 29</p> <p><b>Stated:</b> First time</p> <p><b>To be Completed by:</b> 23 March 2016</p>	<p>RQIA recommend that the person carrying out the next review of the fire risk assessment should hold professional body registration or third party certification for fire risk assessment and be registered accordingly with the relevant body.</p> <p>Reference should be made to correspondence issued by RQIA to all registered homes on 13 January 2013 and the guidance contained in:  <a href="http://www.rqia.org.uk/cms_resources/Competence%20of%20persons%20carrying%20out%20Fire%20Risk%20Assessment.pdf">http://www.rqia.org.uk/cms_resources/Competence%20of%20persons%20carrying%20out%20Fire%20Risk%20Assessment.pdf</a>  <a href="http://www.rqia.org.uk/cms_resources/A%20Guide%20to%20Choosing%20a%20Competent%20Fire%20Risk%20Assessor.pdf">http://www.rqia.org.uk/cms_resources/A%20Guide%20to%20Choosing%20a%20Competent%20Fire%20Risk%20Assessor.pdf</a></p>		
<p><b>Response by Registered Manager Detailing the Actions Taken:</b> NHSCT Senior Fire Officer is registered with the professional body and will oversee all Risk Assessments completed in Ellis Court.</p>			
<p><b>Registered Manager Completing QIP</b></p>	<p>Rosemary Wray</p>	<p><b>Date Completed</b></p>	<p>04/12/15</p>
<p><b>Registered Person Approving QIP</b></p>	<p>Dr Tony Stevens</p>	<p><b>Date Approved</b></p>	<p>08/12/15</p>
<p><b>RQIA Inspector Assessing Response</b></p>	<p><b>C Muldoon</b></p>	<p><b>Date Approved</b></p>	<p><b>04/01/2016</b></p>

*\*Please ensure the QIP is completed in full and returned to [estates.mailbox@rqia.org.uk](mailto:estates.mailbox@rqia.org.uk) from the authorised email address\**