



**THE REGULATION AND QUALITY IMPROVEMENT  
AUTHORITY**

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**ANNOUNCED ESTATES INSPECTION**

<b>Inspection No:</b>	IN017938
<b>Establishment ID No:</b>	1374
<b>Name of Establishment:</b>	The Roddens
<b>Date of Inspection:</b>	21 October 2014
<b>Inspector's Name:</b>	Mr Gavin Doherty

## 1.0 GENERAL INFORMATION

<b>Name of Home:</b>	The Roddens
<b>Address:</b>	22 Queens Street Ballymoney BT53 6JB
<b>Telephone Number:</b>	2766 3520
<b>Registered Organisation/Provider:</b>	Northern Health and Social Care Trust
<b>Registered Manager:</b>	Ms Shani Steenson
<b>Person in Charge of the Home at the time of Inspection:</b>	Ms Shani Steenson
<b>Other person(s) consulted during inspection:</b>	Mr Ronnie Hogg, Estates Department
<b>Type of establishment:</b>	Residential Care Home
<b>Number of Registered Places:</b>	29 RC-I
<b>Date and time of inspection:</b>	21 October 2014 from 10:30 – 12:00
<b>Date of previous inspection:</b>	21 February 2012
<b>Name of Inspector:</b>	Mr 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:

- The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003
- The Residential Care Homes Regulations (Northern Ireland) 2005
- Residential Care Homes Minimum Standards (DHSSPS, 2008)

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 registered manager and staff
- Examination of records
- Inspection of the home internally and externally. Patient's 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 Shani Steenson, Registered manager and Mr Ronnie Hogg from the Trust's Estates Department.

## **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 32 - Premises and grounds
- Standard 35 - Safe and healthy working practices
- Standard 36 - Fire Safety

## **7.0 PROFILE OF SERVICE**

The Roddens is a two storey Residential Care Home located near the town centre of Ballymoney. The home is owned and operated by Northern Health and Social Care Trust. Accommodation for residents is provided in single bedrooms. Access to the first floor is via a passenger lift and stairs. Communal lounge and dining areas are provided throughout the home. The large dining room is also used for planned activities. The home also provides for catering and laundry services on the ground floor. A number of communal sanitary facilities are available throughout the home. A hairdressing room is also provided.

## **8.0 SUMMARY**

Following the Estates Inspection of The Roddens on 21 October 2014 improvements are required to comply with the Residential Care Homes Regulations (Northern Ireland) 2005 and the criterion outlined in the following standards:

- Standard 35 - Safe and healthy working practices
- Standard 36 - Fire Safety

This resulted in three 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 the assistance and hospitality of Ms Shani Steenson, Mr Ronnie Hogg and the Home's staff throughout the inspection process.

## 9.0 INSPECTOR'S FINDINGS

### 9.1 Recommendations and requirements from previous inspection of 5 March 2012.

No	Regulation Ref.	Restated Requirement	Action taken - as confirmed during this inspection	Inspector's Comments
1	26(2)(d)	The floor finish and extractor fan in the Designated Smoking Room were in unacceptable condition and should be replaced.	Both items completed.	Requirement Fulfilled.
No	Regulation Ref.	Requirements	Action taken - as confirmed during this inspection	Inspector's Comments
2	14(2)(a),(c)	The Home's Laundry facility is in the process of being rationalised. Ensure that any changes made are in line with current infection control best practice. Special attention should be paid to the workflow within the Laundry to minimise the risk of cross contamination occurring.	Work completed.	Requirement Fulfilled.
3	14(2)(a),(c)	Ensure the Washer Disinfector in the first floor Sluice Room is replaced.	New Washer Disinfector installed.	Requirement Fulfilled

**9.2 Standard 32 - Premises and grounds** - *The premises and grounds are safe, well maintained and remain suitable for their stated purpose*

9.2.1 There was good evidence of maintenance activities within the home, and the home appeared clean and very well kept. Maintenance procedures for the building and engineering services were in place and appear to comply with this standard. There were therefore no requirements or recommendations made against this standard during this inspection.

**9.3 Standard 35 - Safe and healthy working practices** - *The home is maintained in a safe manner*

9.3.1 By in large, safe and healthy working practices appear evident in the home in accordance with this standard. All gas powered appliances were inspected within the last 12 months and no remedial works were identified at this time. The top score of '5' was awarded by the local council during their most recent inspection by their Environmental Health department on 6 August 2013. However, two issues have been identified for attention by the registered manager. These are detailed below and in the section of the attached quality improvement plan titled '**Standard 35 - Safe and healthy working practices**'.

9.3.2 The risk assessment in relation to the control of Legionella bacteria in the homes hot and cold water systems was carried out on the 5 April 2011 and is now overdue for review. The date for this review was confirmed by Mr Ronnie Hogg as 29 October 2014. It is essential that any remedial works identified as a result of this review are implemented within the stipulated timescales.  
(Item 1 in the attached Quality improvement plan)

9.3.3 Portable appliance testing was to be undertaken at the home on the day of the inspection. Confirmation should be provided to RQIA that this work was undertaken and that any failed items of equipment have been removed from service. (Item 2 in the attached Quality improvement plan)

**9.4 Standard 36: Fire safety** - *Fire safety precautions are in place that reduce the risk of fire and protect patients, staff and visitors in the event of fire.*

- 9.4.1 Fire Safety procedures in the home are, in the main, generally in line with this standard. A fire risk assessment was undertaken on 31 March 2014. The fire alarm & detection system, emergency lighting installation and portable fire-fighting equipment are subject to suitable inspection and testing. In house user checks are also in place for these systems and records were available for inspection within the home. Fire safety training is undertaken regularly throughout the year and to ensure that all staff receive training twice in any given 12 month period. The most recent fire drill was undertaken on 24 June 2014. 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 36: Fire safety**'.
- 9.4.3 Ensure that when the fire risk assessment is next reviewed, the person carrying out the review holds professional body registration or third party certification for fire risk assessment and is registered accordingly with the relevant body. Reference should be made to correspondence issued by RQIA to all registered homes on 13 January 2013 and the guidance contained therein:  
[http://www.rqia.org.uk/what\\_we\\_do/registration\\_inspection\\_and\\_reviews/service\\_provider\\_guidance/fire\\_safety\\_information.cfm](http://www.rqia.org.uk/what_we_do/registration_inspection_and_reviews/service_provider_guidance/fire_safety_information.cfm)  
(Item 3 in the attached Quality improvement plan)

## **10.0 QUALITY IMPROVEMENT PLAN**

The details of the Quality Improvement plan appended to this report were discussed with Ms Shani Steenson and Mr Ronnie Hogg 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 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**



## Quality Improvement Plan

### Announced Estates Inspection

### The Roddens Residential Home

**21 October 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.		✓		Gavin Doherty	22/1/2016
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 Ms Shani Steenson and Mr Ronnie Hogg 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 home to improve the quality of life experienced by patients.

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](mailto: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:**

<b>NAME OF REGISTERED MANAGER COMPLETING QIP</b>	S. Steenson
<b>NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP</b>	Dr Tony Stevens Una Cuning

Announced Estates Inspection to The Roddens Residential Care Home on 21 October 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)
1	Regulation 14 (2)(a),(c) 27 (2)(q)	Ensure that the risk assessment in relation to the control of Legionella bacteria in the homes hot and cold water systems programmed to be carried out on the 29 October 2014 is undertaken, and that any remedial works identified as a result of this review are implemented within the stipulated timescales. (9.3.2 in the Report)	As stipulated in inspection report	Risk assessment undertaken on 29th October 2014. Remedial actions to be implemented on receipt of written report.
2	Regulation 14 (2)(a),(c) 27 (2)(q)	Portable appliance testing was to be undertaken at the home on the day of the inspection. Confirmation should be provided to RQIA that this work was undertaken and that any failed items of equipment removed from service. (9.3.3 in the Report)	12 Weeks	PAT has been undertaken on 25th October with appropriate action taken on results.

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**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)
3	Regulation 27 (4)(a)	Ensure that when the fire risk assessment is next reviewed, the person carrying out the review holds professional body registration or third party certification for fire risk assessment and is registered accordingly with the relevant body. Reference should be made to correspondence issued by RQIA to all registered homes on 13 January 2013 and the guidance contained therein: <a href="http://www.rqia.org.uk/what_we_do/registration_inspection_and_reviews/service_provider_guidance/fire_safety_information.cfm">http://www.rqia.org.uk/what_we_do/registration_inspection_and_reviews/service_provider_guidance/fire_safety_information.cfm</a> (9.4.2 in the Report)	Upon review of fire risk assessment	NHSCT Estates aware of request. Senior Fire Safety Officer Joe Sloan is a member of the IFPO

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**Assurance, Challenge and Improvement in Health and Social Care**