

Announced Premises Inspection Report 17 MAY 2016



Copperfields

Address: 1-3 Moore Street, Aughnacloy, BT69 6AX

Tel No: 028 8555 7922

Inspector: Raymond Sayers

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

1.0 Summary

An announced premises inspection of Copperfields took place on 17 May 2016 from 10.00 to 12.30hrs.

Is care safe?

On the day of the inspection the premises supported the delivery of safe care, one issue was however identified for attention by the registered person. Refer to section 4.3.

Is care effective?

On the day of the inspection the premises supported the delivery of effective care and no issues identified as requiring attention by the registered person. Refer to section 4.4.

Is care compassionate?

On the day of the inspection the premises supported the delivery of compassionate care and no issues were identified as requiring attention by the registered person. Refer to section 4.5.

Is the service well led?

On the day of the inspection the management of the premises was considered to be well led and no issues were identified as requiring attention by the registered person. Refer to section 4.6.

This inspection was underpinned by The Nursing Homes Regulations (Northern Ireland) 2005 and the Care Standards for Nursing Homes 2015.

1.1 Inspection outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	0	1

Details of the QIP within this report were discussed with Mr Henry Edwards, Registered Responsible Person, as part of the inspection process. The timescales for completion commence from the date of inspection.

Enforcement action did not result from the findings of this inspection.

1.2 Actions/enforcement taken following the most recent premises inspection

Other than those items detailed in the previous QIP there were no further actions required to be taken following the last inspection.

2.0 Service Details

Registered organisation/registered person: Edwards Enterprises Ltd	Registered manager: Cherith McKeown
Person in charge of the home at the time of inspection: Cherith McKeown	Date manager registered: 01 April 2005
Categories of care: NH-LD, NH-LD(E), RC-I, NH-DE, NH-I	Number of registered places: 32

3.0 Methods/processes

Prior to inspection the following records were analysed: Previous premises inspection report, statutory notifications over the past 12 months, and duty call log.

During the inspection the inspector talked with: the registered manager, the registered person, two residents, plus laundry and kitchen staff.

The following records were examined during the inspection: copies of building services certificates, building user log books relating to maintenance inspections of building engineering services, legionellae risk assessment, and fire risk assessment.

4.0 The Inspection

4.1 Review of requirements and recommendations from the previous inspection dated 20 October 2015

The most recent inspection of the home was an unannounced finance management inspection, IN023744 completed on 20 October 2015. The completed QIP was returned, and approved by the Finance inspector on 12 December 2015.

4.2 Review of requirements and recommendations from the last premises inspection dated 08 August 2013

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulation 14(2)(a)(b)&(c) Stated: First time	Confirm that the electrical engineer has assessed the BS7671 Periodic Inspection Report for the electrical installation and that the installation is compliant with Regulation 4 of the Electricity at Work Regulations.	Met
	Action taken as confirmed during the inspection: Periodic inspection report reviewed and deemed satisfactory.	
Requirement 2 Ref: Regulation 14(2)(a)(b)&(c) Stated: First time	Complete a health and safety risk assessment for the operation of the kitchen gas cooker appliance and implement any subsequent control modifications/procedures.	Met
	Action taken as confirmed during the inspection: Control measures implemented.	
Previous Inspection Recommendations		Validation of Compliance
Recommendation 1 Ref: Standard 35.1 Stated: First time	Complete a legionella risk assessment indicating health and safety control measures implemented to reduce/eliminate risk.	Met
	Action taken as confirmed during the inspection: Control measures implemented.	
Recommendation 2 Ref: Standard 35.1 Stated: First time	Submit a valid copy of the emergency generator competent engineer maintenance service inspection certificate.	Met
	Action taken as confirmed during the inspection: Valid certificate submitted.	

Previous Inspection Recommendations		Validation of Compliance
Recommendation 3 Ref: Standard 35.1 Stated: First time	Confirm that portable and transportable electrical equipment is inspected and tested in accordance with Health & Safety Guidance Note HSG107(Maintaining Portable and Transportable Electrical Equipment).	Met
	Action taken as confirmed during the inspection: Valid confirmation received.	
Recommendation 4 Ref: Standard 35.1 Stated: First time	Submit to RQIA estates inspector a copy of patient hoisting appliances Lifting Operations and Lifting Equipment Regulations (LOLER) through examination reports for examinations due in May 2013	Met
	Action taken as confirmed during the inspection: Valid LOLER certificates submitted.	

4.3 Is care safe?

A range of building services maintenance documents were presented for review during this estates inspection. This documentation included: risk assessments, inspection and test reports for various elements of the engineering services.

Documentation relating to the safe operation of the premises, installations and engineering services was presented for review during this estates inspection.

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.

The standard used by the registered person to determine the level of fire safety within the premises takes account of: the interaction between the physical fire precautions, the fire hazards, the number of patients, the management policies and the availability of adequately trained staff. This standard has been referenced in the fire risk assessment, but the risk assessment review was not completed by a risk assessor holding professional body registration for fire risk assessors, as recommended by RQIA.

The registered person stated that a review will be completed by an assessor holding accreditation as recommended by RQIA.

A legionella risk assessment was completed, and the water storage and distribution system was chlorinated on 6 October 2015.

The fire risk assessment issue identified during this estates inspection is detailed in the 'areas for improvement' section below.

Areas for improvement

1. The annual fire risk assessment review was not completed by a fire risk assessor holding registration accreditation as specified in RQIA guidance communication "Competence of persons carrying out fire risk assessments in regulated residential care and nursing homes" dated 02 April 2015. (On 31May 2016 the registered manager stated that an accredited fire risk assessor was on site and that a new risk assessment document would be available shortly).

Refer to Quality Improvement Plan recommendation 1.

Number of requirements:	0	Number of recommendations:	1
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4.4 Is care effective?

There are arrangements in place for routine premises management plus emergency break-down repairs. Service users are involved, where appropriate in decisions around the decoration and maintenance of the premises.

Interior refurbishment has been ongoing in the home; floor coverings have been renewed and wall /ceiling surfaces redecorated. The interior environment is maintained in a very good condition.

This supports the delivery of effective care.

Number of requirements:	0	Number of recommendations:	0
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4.5 Is care compassionate?

The accommodation reviewed during this premises inspection was well decorated, comfortable, clean, free from malodours, and adequately lit.

Service users are consulted about decisions regarding bedroom decoration, replacement surface finishes and fabrics where appropriate.

This supports the delivery of compassionate care.

Number of requirements:	0	Number of recommendations:	0
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4.6 Is the service well led?

Premises related policies and documents are retained in a manner which is accessible to authorised persons.

Arrangements are in place for managing premises related incidents/notifiable events, and Medical Device and Equipment Alerts.

The registered person has dealt appropriately with previous RQIA inspection report QIP items and other relevant issues relating to the premises. Adequate support and resources are provided by the registered responsible person.

There are appropriate relationships with maintenance personnel, specialist contractors and other statutory regulators where appropriate. This supports a well led service.

Number of requirements:	0	Number of recommendations:	0
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5.0 Quality Improvement Plan

The issue identified during this inspection is detailed in the QIP. Details relating to this QIP were discussed with Mr Henry Edwards, Registered Responsible Person 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.

5.1 Statutory requirements

This section outlines the actions which must be taken so that the registered person/manager meets legislative requirements based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Nursing Homes Regulations (Northern Ireland) 2005.

5.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and the Care Standards for Nursing Homes 2015. They promote current good practice and if adopted by the registered person may enhance service, quality and delivery.

5.3 Actions taken by the registered manager/registered person

The QIP will 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 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 areas for improvement that exist in the service. The findings reported on are those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not exempt the registered person/manager from their responsibility for maintaining compliance with the regulations and standards. It is expected that the requirements and recommendations outlined in this report will provide the registered person/manager with the necessary information to assist them to fulfil their responsibilities and enhance practice within the service.

Quality Improvement Plan

Recommendations

<p>Recommendation 1</p> <p>Ref: Standard 48.1</p> <p>Stated: First time</p> <p>To be Completed by: At time of next fire risk assessment review</p>	<p>The registered responsible person should ensure that at the time of next review of the fire risk assessment, the fire risk assessor holds professional body registration or third party body certification for fire risk assessments as recommended in RQIA communication dated 02 April 2015. "Competence of persons carrying out fire risk assessments in residential care and nursing homes".</p>
	<p>Response by Registered Manager Detailing the Actions Taken: The Inspectors recommendation has been actioned.</p>

Please ensure this document is completed in full and returned to estates.mailbox@rqia.org.uk from the authorised email address



The Regulation and Quality Improvement Authority

9th Floor

Riverside Tower

5 Lanyon Place

BELFAST

BT1 3BT

Tel 028 9051 7500

Fax 028 9051 7501

Email info@rqia.org.uk

Web www.rqia.org.uk

 [@RQIANews](https://twitter.com/RQIANews)