



The Regulation and
Quality Improvement
Authority

Fairlawns Residential Care Home
RQIA ID: 1505
63 Drumcairn Rd
Armagh
BT61 8DQ

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**Announced Estates Inspection
of
Fairlawns Residential Care Home**

09 April 2015

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
Tel: 028 9051 7500 Fax: 028 9051 7501 Web: www.rqia.org.uk

1. Summary of Inspection

An announced estates inspection took place on 09 April 2015 from 09.35am to 13.20pm. Overall on the day of the inspection the home was found to be supporting 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.

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.

The two requirements and two recommendations listed in the 29 August 2012 Estates inspection report were implemented.

1.2 Actions/Enforcement Resulting from this Inspection

There was no enforcement action commenced as a result of the findings listed on this inspection report.

1.3 Inspection Outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	6	0

The details of the QIP within this report were discussed with Mrs Claire Cassidy (Manager) and Mr Jim Donaldson (Maintenance Operative/Janitor) during the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Organisation/Registered Person: Mr Michael Murphy	Registered Manager: Mrs Claire Cassidy
Person in Charge of the Home at the Time of Inspection: Mrs Claire Cassidy	Date Manager Registered: April 2005
Categories of Care: RC-PH, RC-MP, RC-DE, RC-I, RC-MP(E)	Number of Registered Places: 45
Number of Residents Accommodated on Day of Inspection: 44	Weekly Tariff at Time of Inspection: As per Southern Trust contract

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 – The premises and grounds are safe, well maintained and remain suitable for their stated purpose.

Standard 28: Safe and healthy working practices – The home is maintained in a safe manner.

Standard 29: Fire safety precautions are in place that reduce the risk of fire and protect patients, staff and visitors in the event of fire.

4. Methods/Process

Specific methods/processes used in this inspection include the following:
During the inspection the inspector met with the Manager (Mrs Claire Cassidy) and Maintenance Operative/Janitor (Mr Jim Donaldson).

The following records were examined during the inspection:

- Fire safety risk assessment and associated control measures;
- Legionella risk assessment and associated control measures;
- Lifting Operations & Lifting Equipment control measures;
- General health & safety control measures.

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 25 March 2015; two recommendations have been made as a result of this inspection. The completed Quality Improvement Plan has not yet been returned for care inspector approval; the recommendations will be followed up at the next care inspection.

5.2 Review of Requirements and Recommendations from the last Estates Inspection

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulation 27.(2)(b)	The registered manager must ensure that: Eradicate condensation defect at kitchen ceiling and apply new ceiling finish.	Met
	Action taken as confirmed during the inspection: Condensation issue resolved and decoration repair completed.	
Previous Inspection Recommendations		Validation of Compliance
Requirement 2 Ref: Regulations 14.(2)(a)(b)(c)	The registered manager must ensure that : Verify that the electrical installation Periodic Inspection report is valid and that any subsequent recommendations have been implemented in accordance with the Electricity at Work regulations.	Met
	Action taken as confirmed during the inspection: BS7671 Periodic Inspection Report dated 11 September 2014 examined and deemed satisfactory.	
Previous Inspection Recommendations		Validation of Compliance
Recommendation 1 Ref: Standard 27.1	The registered manager must: Clean bedroom 4 carpet finish or install new floor covering.	Met
	Action taken as confirmed during the inspection: New flooring installed.	

Recommendation 2 Ref: Standard 27.1	The registered manager must: Replace silicone sealant at WC pan/floor joint in bedroom 16 en-suite.	Met
	Action taken as confirmed during the inspection: Sealant replaced.	

5.3 Standard: Premises and Grounds

Is Care Safe? (Quality of Life)

A range of documents relating to the maintenance and inspection 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.

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

The surface of a number of floor tiles had been damaged by the removal of a WC support frame in shower room 3. Maintenance Operative/Janitor advised that the tiled surfaces would be repaired.

Number of Requirements	1	Number Recommendations:	0
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5.4 Standard: 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. 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 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

The passenger lift installation Lifting Operations and Lifting Equipment Regulations (LOLER) Regulation 9 “thorough examination” was last completed on 23 August 2014; i.e. more than six months prior to inspection date.

The certificate for the Local Exhaust ventilation (LEV) statutory cleaning of the kitchen ventilation ducting was not available for examination.

Number of Requirements	2	Number Recommendations:	0
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5.5 Standard: 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.

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 is recorded 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

The meeting edges of a stairwell/corridor double leaf door situated on the lower ground floor were not sealed to prevent the passage of “cold smoke”.

The passenger lift motor situated adjacent a lower ground floor bedroom was not enclosed within a 30 minute fire resistant construction.

The fire risk assessment action plan had not been fully implemented; it is noted that four window openings adjacent the wood pellet boiler had not been upgraded to 30 minute fire resistant glazing.

Number of Requirements	3	Number Recommendations:	0
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5.6 Additional Areas Examined

N/A

6. Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Mrs Claire Cassidy and Mr Jim Donaldson during 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 the Residential Care Homes Minimum Standards. 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 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 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	
Requirement 1 Ref: Regulation 27.(2)(b) Stated: First time To be Completed by: 4 June 2015	Repair & seal surfaces of floor tiling adjacent WC in shower room 3. Response by Registered Manager Detailing the Actions Taken: Tiled flooring : Surface repaired and sealed as required. Registered manager witnessed completion of same.
Requirement 2 Ref: Regulations 14.(2)(a),(b) & (c) Stated: First time To be Completed by: 4 June 2015	Verify that "Lifting Operations & Lifting Equipment Regulations" (LOLER) thorough examinations of the passenger lift installation are completed in accordance with LOLER Reg.9. Response by Registered Manager Detailing the Actions Taken: LOLER Inspection scheduled to be undertaken by appropriate Lift Engineer prior to specified completion date.
Requirement 3 Ref: Regulation 27.(2)(q) Stated: First time To be Completed by: 4 June 2015	Submit a copy of the Local Exhaust Ventilation (LEV) kitchen extract ventilation cleaning certificate. Response by Registered Manager Detailing the Actions Taken: Assessment of extractor hood flue undertaken by appropriate ventilation company. We have been advised that Local Exhaust Ventilation (LEV) kitchen extraction ventilation cleaning certificate is not required for our kitchen. Advised to review insurance policy document to confirm this. LEV certificate is applicable in the instance of use of deep fat fryer. We do not have same in care home kitchen. Extractor over cooker mainly manages steam produced by cooking. The insurance document specifies need to inspect/clean filters in extractor hood monthly. Cleaning schedule at Fairlawns requires filters to be removed and cleaned every two weeks.
Requirement 4 Ref: Regulation 27.(4)(a) Stated: First time To be Completed by: 27 August 2015	Review the recommended fire safety improvement works action plan and liaise with the fire safety risk assessor to ensure that any required actions are implemented in a prioritised manner. Response by Registered Manager Detailing the Actions Taken: Review of risk assessment undertaken by appropriate person. Fire risk assessment updated to include same. Please see attached report, detailing the assessment and recommendations.
Requirement 5 Ref: Regulations 27.(4)(b),(c) & (d)	Erect a 30 minute fire resistant enclosure to contain smoke/fire in the lower ground floor lift motor assembly and install a fire detection sensor linked to the BS5839 system in the enclosure.

Stated: First time To be Completed by: 30 July 2015	Response by Registered Manager Detailing the Actions Taken: Thirty minute fire resistant enclosure has been designed to fit lower ground floor lift motor assembly unit. Fitting of enclosure scheduled prior to specified completion date. Fire detection sensor will be installed inside unit and linked to the BS5839 system. Electrical engineer liasing with enclosure fitters re: same.		
Requirement 6 Ref: Regulation 27.(4)(a) Stated: First time To be Completed by: 28 May 2015	Complete an inspection of all fire doors and implement corrective works where necessary to address any defects in fire resistance integrity.		
	Response by Registered Manager Detailing the Actions Taken: Fire doors inspected by appropriate person. Corrective works scheduled to be carried out prior to specified completion date.		
Recommendations			
Recommendation 1	None		
Registered Manager Completing QIP	Claire Cassidy	Date Completed	29/05/2015
Registered Person Approving QIP	Michael Murphy	Date Approved	29/05/2015
RQIA Inspector Assessing Response	Raymond Sayers	Date Approved	01/06/2015

Please ensure the QIP is completed in full and returned to Estates.Mailbox@rqia.org.uk from the authorised email address