

**Announced Estates Inspection
of
Manor Court Residential Home**

11 June 2015

1. Summary of Inspection

An announced estates inspection took place on 11 June 2015 from 10.30am to 1.45pm. 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 items 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
Total number of requirements and recommendations made at this inspection	3	3

The details of the QIP within this report were discussed with the Mrs Carol McCoy, Manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Organisation/Registered Person: Fold Housing Association/Fiona McAnespie	Registered Manager: Mrs Carol McCoy
Person in Charge of the Home at the Time of Inspection: Mrs Carol McCoy	Date Manager Registered: 24 March 2014
Categories of Care: RC-LD, RC-LD(E), RC-I, RC-MP(E), RC-DE	Number of Registered Places: 41
Number of Residents Accommodated on Day of Inspection: 35	Weekly Tariff at Time of Inspection: £461 + £15 top up

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, Quality Improvement Plan return and statutory notifications listed in the previous 12 month period.

During the inspection the inspector met with Mrs Carol McCoy, Manager.

The following records were examined during the inspection: Copies of building engineering service records, building user log books relating to the maintenance, inspection and testing 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 3 March, 2015, reference IN020432. The completed QIP was returned, and approved by the care inspector on 14 April 2015.

5.2 Review of Requirements and Recommendations from the last Estates Inspection dated 07 November 2012, Reference IN012547.

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulation 14.(2)(a)	Provide Lifting Operations and Lifting Equipment Regulations (LOLER) thorough examination inspection report details in accordance with Health and Safety Executive guidelines.	Met
	Action taken as confirmed during the inspection: Valid LOLER certificate dated 12/12/2014 examined.	
Requirement 2 Ref: Regulation 27.(4)(a)	Implement fire safety improvement works/procedures in compliance with HTM 84 recommendations.	Partially Met
	Action taken as confirmed during the inspection: Last review completed 21 July 2014; confirmation of implementation of recommended control measures was not recorded/verified.	
Previous Inspection Recommendations		Validation of Compliance
Recommendation 1 Ref: Standard 27.1	Redecorate the roof eaves fascia at the sun lounge.	Not Met
	Action taken as confirmed during the inspection: Redecoration works were not completed	

5.3 Standard 27: Premises and Grounds

Is Care Safe? (Quality of Life)

A range of documents relating to the maintenance of the premises was presented for review during this Estates inspection. The documents included inspection and test reports for various elements of the engineering services, plus relevant risk assessments. This supports the delivery of safe care.

[An issue was however identified for attention during this Estates inspection and is detailed in the 'areas for improvement' section below.]

Is Care Effective? (Quality of Management)

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

[There were no issues identified for attention during this Estates inspection.]

Is Care Compassionate? (Quality of Care)

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

[Two issues were however identified for attention during this Estates inspection, and are detailed in the 'areas for improvement' section below.]

Areas for Improvement

External roof eaves timberwork is in poor decorative condition adjacent resident sun lounge area at rear of premises.

Reference Quality Improvement Plan (QIP), Recommendation 1.

It was noted that high level horizontal surfaces on day area roof trusses were covered with dust.

Reference Quality Improvement Plan (QIP), Recommendation 2.

Number of Requirements	0	Number Recommendations:	2
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5.4 Standard 28: Safe and Healthy Working Practices

Is Care Safe? (Quality of Life)

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

[Three issues were however identified for attention during this Estates inspection, and they are detailed in the 'areas for improvement' section below.]

Is Care Effective? (Quality of Management)

The dependency 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.

[There were no issues identified for attention during this Estates inspection.]

Is Care Compassionate? (Quality of Care)

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

[There were no issues identified for attention during this Estates inspection.]

Areas for Improvement

There was no evidence to verify that any contingency provision had been made to supply an emergency generator to the home during prolonged power failures.

Reference Quality Improvement Plan (QIP), Requirement 1.

A mobile hoist was available in the facility; a valid Lifting Operations & Lifting Equipment Regulations (LOLER) Regulation 9 thorough examination report was not available for review. Reference Quality Improvement Plan (QIP), Requirement 2.

A legionella risk assessment was completed in July 2014, some control measures are implemented, there appears to be some confusion as to the location of sentinel outlets. It is not clear that temperature control monitoring is implemented as per the risk assessor's recommendations.

Reference Quality Improvement Plan (QIP), Requirement 3.

Number of Requirements	3	Number Recommendations:	0
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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. These include: 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.

[There were no issues identified for attention during this Estates inspection.]

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.

[An issue was however identified for attention during this Estates inspection, and is detailed in the 'areas for improvement' section listed below.]

Is Care Compassionate? (Quality of Care)

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

[There were no issues identified for attention during this Estates inspection.]

Areas for Improvement

The fire risk assessment completed on 21 July 2014 by an accredited Fire Risk assessment company stated that the risk level was assessed as tolerable. Some recommended improvements were listed in the works action plan, but were not verified as implemented; the risk assessment is to be reviewed in July 2015.

Reference Quality Improvement Plan (QIP), Recommendation 3.

Number of Requirements	0	Number Recommendations:	1
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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 Carol McCoy, Manager 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 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 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 14.(2),(a),(b) and (c) Stated: First time To be Completed by: 30 July 2015	<p>Submit verification that a contingency plan has been developed and implemented to safeguard residents' health, safety and welfare during prolonged power supply failures.</p> <p>Response by Registered Manager Detailing the Actions Taken: Generator MCCB socket fitted in the switch room. List of suppliers of generators posted in main office</p>
Requirement 2 Ref: Regulation 14.(2),(a),(b) and (c) Stated: First time To be Completed by: 30 July 2015	<p>Verify that the mobile hoist appliance is subjected to Lifting Operations and Lifting Equipment Regulation (LOLER) 9 thorough examinations and that the current certificate is valid.</p> <p>Response by Registered Manager Detailing the Actions Taken: Certificate insitu by Allianz for maintenance of hoist to LOLER standard</p>
Requirement 3 Ref: Regulation 14.(2),(a),(b) and (c) Stated: First time To be Completed by: 27 August 2015	<p>Clarify that the legionella risk assessment user control measures implemented are in accordance with the recommendations of the legionella risk assessment. The risk assessor completing the proposed July 2015 review of the legionella risk assessment should verify if the existing controls are compliant with the 2014 risk assessment recommendations.</p> <p>Response by Registered Manager Detailing the Actions Taken: Monthly check reports from Jan - present are insitu Coral Environmental took over the contract from August 2014. Monthly temp checks are carried out by Coral Environmental. TMV servicing is carried out twice a year. Sampling is carried out twice a year. Showerhead C&D carried out 3 monthly. CWST inspections 6 monthly. C&D carried out as required.</p>

Recommendations			
Recommendation 1 Ref: Standard 27.1 Stated: First time To be Completed by: 06 August 2015	Complete cleaning of high level surfaces in activity/day room.		
	Response by Registered Manager Detailing the Actions Taken: This was completed 7/7/15		
Recommendation 2 Ref: Standard 27.1 Stated: Second time To be Completed by: 27 August 2015	Repair and redecorate exterior roof eaves and verge timber.		
	Response by Registered Manager Detailing the Actions Taken: We have included for Major works to be carried out to the rain water goods of the building within the financial year 15-16. Consultant has been requested to inspect the current condition of the building. Inspection carried out 20/7/15		
Recommendation 3 Ref: Standards 29.1 and 29.2 Stated: Second time To be Completed by: 11 September 2015	Verify that 2014 fire risk assessment recommendations are completed. Record any subsequent recommended corrective/improvement works completed as works progress, after proposed July 2015 fire risk assessment review.		
	Response by Registered Manager Detailing the Actions Taken: 2014 risk assessment recommendations completed		
Registered Manager Completing QIP		Carol McCoy	Date Completed 30/07/15
Registered Person Approving QIP		Fiona McAnespie	Date Approved 30/7/15
RQIA Inspector Assessing Response		Raymond Sayers	Date Approved # 22/10/15

clarification/verification is required on some items

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