

Announced Premises Inspection Report 10 January 2017



Roughan House

Type of Service: Residential Care Home Address: 68 Roughan Road, Newmills, BT71 4HB Tel No: 028 8774 0816 Inspector: Raymond Sayers

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Assurance, Challenge and Improvement in Health and Social Care

1.0 Summary

An announced premises inspection of Roughan House took place on 10 January 2017 from 10:00 to 12:15hours.

The inspection sought to assess progress with any issues raised during and since the last premises inspection and to determine if the residential care home was if the service was well led, delivering safe, effective and compassionate care.

Is care safe?

On the day of the inspection the premises supported the delivery of safe care. Refer to section 4.3.

Is care effective?

On the day of the inspection the premises supported the delivery of effective care. Refer to section 4.4.

Is care compassionate?

On the day of the inspection the premises supported the delivery of compassionate care. 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. Refer to section 4.6.

This inspection was underpinned by The Residential Care Homes Regulations (Northern Ireland) 2005 and the Residential Care Homes Minimum Standards 2011.

1.1 Inspection outcome

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

This inspection resulted in no requirements or recommendations being made. Findings of the inspection were discussed with Mr Patrick McAvoy, registered Responsible Person as part of the inspection process, and can be found in the main body of the report.

There was no enforcement action implemented as a result of the findings of this inspection.

1.2 Actions/enforcement taken following the most recent premises inspection

Other than those actions detailed in the previous QIP there were no further actions required to be taken following the most recent premises inspection, IN015023, dated 13 June 2013.

2.0 Service Details

Registered organisation/registered provider: Roughan Care Ltd/Mr Patrick Anthony McAvoy	Registered manager: Mrs Dolores Carron
Person in charge of the home at the time of inspection: Mr Patrick McAvoy	Date manager registered: Mrs Dolores Carron
Categories of care: RC-I, RC-LD, RC-LD(E), RC-MP	Number of registered places: 16

3.0 Methods/processes

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

During the inspection the inspector met with two residents and two kitchen staff, and Mr Patrick McAvoy, Registered Responsible Person.

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

4.0 The Inspection

The most recent inspection of the residential care home was an unannounced care inspection, IN025099, dated 30 November 2016. The completed QIP was returned, and approved by the care inspector on 30 November 2016. This QIP will be validated by the specialist inspector at their next inspection.

4.1 Review of requirements and recommendations from the last premises inspection dated 13 June 2013

Last premises inspe	Validation of compliance	
Requirement 1 Ref: Regulations	Complete a fire risk assessment review and implement a prioritized remedial works action plan	
27.(4)(a) & (d)(i)	Action taken as confirmed during the inspection:	Met
Stated: First time	Fire risk assessment completed and action plan recommendation implemented.	
Last premises inspe	ction recommendations	Validation of compliance
Recommendation 1 Ref: Standard 27.1	Remove flaking paint finish from laundry room ceiling and ensure the ceiling surface is maintained in a good condition.	Met
Stated: First time	Action taken as confirmed during the inspection: Repairs implemented.	inct
Recommendation 2 Ref: Standard 28.1	Assess LOLER through examination report recommendations and implement a prioritise works action plan in accordance with a health and safety risk assessment.	Met
Stated: First time		
	Action taken as confirmed during the inspection: Repairs implemented.	
Recommendation 2	Complete a review of the legionella risk assessment and implement water storage and	
Ref: Standard 28.1	distribution system temperature control monitoring in compliance with L8 Approved Code of Practice.	Met
Stated: First time	Action taken as confirmed during the inspection: Control measures implemented.	

4.2 Is care safe?

A range of documents related to the maintenance and inspection of the premises was presented for review during this premises inspection. This documentation included inspection and test reports for various elements of the engineering services, and risk assessments. Documentation relating to the safe operation of the premises, installations and engineering services was presented for review during this premises 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 service users, the management policies, and the availability of adequately trained staff. This standard has been referenced in the fire risk assessment which was carried out by a risk assessor holding professional body registration for fire risk assessors.

This supports the delivery of safe care.

	Number of requirements	0	Number of recommendations:	0
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4.3 Is care effective?

There are arrangements in place for routine premises management, and timely breakdown/repair maintenance. Where appropriate service users are involved in decisions around the maintenance of the interior environment.

This supports the delivery of effective care.

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

The accommodation reviewed during this inspection was well maintained, comfortable, clean, well ventilated and adequately illuminated.

Service users are consulted about decisions around decoration and issues in private accommodation where appropriate.

This supports the delivery of compassionate care.

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

Premises related policies and documents are retained in a manner 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 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.

This supports a well led service.

Number of requirements	0	Number of recommendations:	0

5.0 Quality improvement plan

There were no issues identified during this inspection, and a QIP is neither required, nor included, as part of this inspection report.

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 provider from their responsibility for maintaining compliance with the regulations and standards.





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Image: Comparison of the system of the

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