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Announced Estates Inspection of Greenfield Residential Care Home

4 August 2015

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
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2. Service Details

Registered Organisation/Registered Person: Western Health and Social Care Trust	Registered Manager: Donna Tracey
Person in Charge of the Home at the Time of Inspection: Donna Tracey	Date Manager Registered: 01 April 2005
Categories of Care: RC - I	Number of Registered Places: 34
Number of Residents Accommodated on Day of Inspection:	Weekly Tariff at Time of Inspection: Trust rates

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 and/or themes has/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, statutory notifications over the past 12 months.

During the inspection the inspector met with Donna Tracey. The inspector also met with the WHSCT Estates Officer Jackie Gallagher at the WHSCT Estates offices at Altnagelvin Area Hospital following the inspection.

The following records were examined during the inspection and following the inspection at the WHSCT Estates offices: Copies of service records and in-house log books relating to the maintenance and upkeep of the building and engineering services, legionellae risk assessment, fire risk assessment.

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Requirement 3 Ref: Regulation 27 (2)(c)	Provide confirmation that the home's passenger lift has been subjected to thorough examinations in accordance with the requirements of LOLER. Reports of examinations should be retained at the home.	ons in ER.	
	Action taken as confirmed during the inspection: Copies of thorough examination reports inspected at the home.		
Requirement 4 Ref: Regulation 14 (2)(c)	Provide confirmation that the defects listed in the report of the periodic inspection of the fixed electrical installation have received appropriate attention.		
	Action taken as confirmed during the inspection: WHSCT Estates Officer confirmed that this has been addressed as part of the on-going annual safety checks to the installation by the WHSCT Estates Department. Records of subsequent inspections provided.	Met	
Requirement 5 Ref: Regulation 27 (2)(c)	Provide confirmation that the automatic washer disinfector (bedpan washer) is subjected to suitable service and validation checks by a competent person at appropriate frequencies.	Met	
	Action taken as confirmed during the inspection: Records provided to confirm that this has been met.		
Requirement 6 Ref: Regulation 27.(4)(a)	Ensure that the fire risk assessor has signed off the fire risk assessment taking account of the remedial works which have been carried out to address the action plan.	Met	
	Action taken as confirmed during the inspection: Subsequent fire risk assessment review report signed off by assessor provided at inspection.		

2. The manager also stated that there were occasional access issues due to parking by users of the adjacent children's school facility with whom the entrance roadway is shared. One such incident resulted in restricted access to an emergency services vehicle gaining access to the home.

See requirement 2. in the Quality Improvement Plan.

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2	Number Recommendations:	0
	2	2 Number Recommendations:

5.4 Standard 28: 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.

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.

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)

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

Areas for improvement

- The automatic washer disinfector (bedpan washer) was out of service at the time of inspection.
 - See requirement 3. in the Quality Improvement Plan.
- 2. Records presented indicated that good attention was being paid to the staff procedures around water safety including monitoring and recording of water temperatures as well as flushing of seldom used outlets. While this is good to note, the inspector felt that some training to the relevant staff involved in the procedures would be of benefit as there appeared to be some disparity around how the results were recorded. See requirement 4. in the Quality Improvement Plan.

Number of Requirements	2	Number Recommendations: 0	٦
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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.

Requirement 5 Ref: Standard 27 (4)(d)(i)	Carry out remedial works to provide smoke seals to corridor doors leading onto the stairwells and any other items contained in the action plan of the fire risk assessment which have not been implemented.					
Stated: First time To be Completed by: In line with timescales	Response by Registered Manager Detailing the Actions Taken: Job request forwarded to Estates Services on 14-08-2015 to request smoke seals on corridor doors be checked and seals fitted where needed.					
determined by the fire risk assessor						
Registered Manager Co	ompleting QIP	Donna Tracey	Date Completed	14-08-2015		
Registered Person App	proving QIP	Eaine Hay	Date Approved	18-8-15		
RQIA Inspector Assessing Response		Pamylon	Date Approved	*18/9/15		

^{*}Please ensure the QIP is completed in full and returned to estates mailbox@rcia org.uk from the authorised email address*

*Everal items require danlieshim or follow up