

# Announced Premises Inspection Report 06 September 2016



## The Beeches Professional & Therapeutic Services

Type of service: Residential Care Home  
Address: 41 Lisburn Road, Ballynahinch, BT24 8TT  
Tel No: 028 9756 1800  
Inspector: Gavin Doherty

[www.rqia.org.uk](http://www.rqia.org.uk)

Assurance, Challenge and Improvement in Health and Social Care

## 1.0 Summary

An unannounced inspection of The Beeches Professional & Therapeutic Services took place on 06 September 2016 from 10:30 to 12:30.

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 delivering safe, effective and compassionate care and if the service was well led.

### Is care safe?

On the day of the inspection the premises supported the delivery of safe care. However two issues were identified for attention by the registered provider. Refer to section 4.3

### Is care effective?

On the day of the inspection the premises supported the delivery of effective care.

### Is care compassionate?

On the day of the inspection the premises supported the delivery of compassionate care.

### Is the service well led?

On the day of the inspection the management of the premises was considered to be well led.

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
<b>Total number of requirements and recommendations made at this inspection</b>	0	2

Details of the Quality Improvement Plan (QIP) within this report were discussed with Mr James Wilson, Registered 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 actions detailed in the QIP there were no further actions required to be taken following the last inspection.

## 2.0 Service details

<b>Registered organisation/registered person:</b> The Beeches Professional & Therapeutic Services/Mr James Brian Wilson	<b>Registered manager:</b> Mrs Roisin McClenaghan
<b>Person in charge of the home at the time of inspection:</b> Mrs Roisin McClenaghan	<b>Date manager registered:</b> 01 April 2005
<b>Categories of care:</b> RC-LD, RC-LD(E)	<b>Number of registered places:</b> 34

## 3.0 Methods/processes

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

During the inspection the inspector met with Mr James Wilson, registered person.

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

## 4.0 The inspection

### 4.1 Review of requirements and recommendations from the most recent inspection dated 15/09/15

The most recent inspection of the home was an unannounced care inspection. The completed QIP was returned and approved by the care inspector. This QIP will be validated by the care inspector at the next care inspection.

## 4.2 Review of requirements and recommendations from the last premises inspection dated 02/05/13

Last premises inspection statutory requirements		Validation of compliance
<b>Requirement 1</b> <b>Ref:</b> Regulation 13 (7) <b>Stated:</b> First time	<p>Ensure that the shelving and work surfaces in the Laundry area are suitably sealed and can be easily cleaned in accordance with current infection control best practice.</p> <hr/> <p><b>Action taken as confirmed during the inspection:</b>            Inspector confirmed that all work surfaces were suitably sealed at the time of inspection.</p>	<b>Met</b>
<b>Requirement 2</b> <b>Ref:</b> Regulation 14 (2)(a)(c) <b>Stated:</b> First time	<p>Ensure that the remedial works required as a result of the most recent inspection of the home's fixed electrical installation on 11 October 2011, are implemented without further delay.</p> <hr/> <p><b>Action taken as confirmed during the inspection:</b>            Inspector confirmed that these works had been completed at the time of inspection.</p>	<b>Met</b>
<b>Requirement 3</b> <b>Ref:</b> Regulation 14 (2)(a)(c) <b>Stated:</b> First time	<p>Ensure that the required weekly and monthly in-house user checks with regards to the:</p> <ul style="list-style-type: none"> <li>• Fire alarm and detection system</li> <li>• Emergency lighting installation</li> <li>• Portable fire-fighting equipment</li> </ul> <p>Are carried out, with records maintained and available for inspection within the home.</p> <hr/> <p><b>Action taken as confirmed during the inspection:</b>            Inspector confirmed that these records were available and up to date at the time of inspection.</p>	<b>Met</b>
Last premises inspection recommendations		Validation of compliance
<b>Recommendation 1</b> <b>Ref:</b> Standard 28.1 <b>Stated:</b> First time	<p>Ensure that the flushing of all seldom used outlets within the home is increased to twice weekly, in accordance with current best practice guidance (DHSSPSNI, Health Technical Memorandum 04-01).</p> <hr/> <p><b>Action taken as confirmed during the inspection:</b>            Inspector confirmed that these records were available and up to date at the time of inspection.</p>	<b>Met</b>

<b>Recommendation 2</b>  <b>Ref:</b> Standard 29.1  <b>Stated:</b> First time	In light of the recent correspondence issued by RQIA regarding the implementation of fire risk assessments within care homes, it is recommended that the home considers engaging a suitably registered fire risk assessor to undertake this process in the future.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> The home now employs the services of a suitably accredited fire risk assessor.	

### 4.3 Is care safe?

A range of documentation in relation to the maintenance and upkeep 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 overall 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.

A number of issues were however identified for attention during this premises inspection. These are detailed in the 'areas for improvement' section below.

#### Areas for improvement

1. The periodic inspection and testing of the premises 'fixed electrical installation' will be due before 11 October 2016. Ensure that this important inspection is undertaken in a timely manner and that any significant findings or defects are implemented within the timescales stipulated in the report.  
(Refer to recommendation 1 in the Quality Improvement Plan).
2. Ensure that the thermostatic mixing valves (TMV's) installed throughout the premises, are serviced and maintained in accordance with the manufacturer's guidelines and current best practice guidance. Relevant information can be accessed in HSG274 part 2 'The control of legionella bacteria in hot and cold water systems' which is available at: <http://www.hse.gov.uk/pubns/priced/hsg274part2.pdf>  
(Refer to recommendation 2 in the Quality Improvement Plan).

<b>Number of requirements</b>	<b>0</b>	<b>Number of recommendations:</b>	<b>2</b>
-------------------------------	----------	-----------------------------------	----------

#### 4.4 Is care effective?

There are arrangements in place for routine premises management and upkeep as well as timely breakdown/repair maintenance. Service users are involved where appropriate in decisions around the upkeep of the premises.

This supports the delivery of effective care.

No areas for improvement were identified during the inspection.

<b>Number of requirements</b>	<b>0</b>	<b>Number of recommendations:</b>	<b>0</b>
-------------------------------	----------	-----------------------------------	----------

#### 4.5 Is care compassionate?

The areas of the premises reviewed during this premises inspection were well presented, comfortable, clean, free from malodours and adequately lit.

Service users are consulted about decisions around décor and the private accommodation where appropriate.

This supports the delivery of compassionate care.

No areas for improvement were identified during the inspection.

<b>Number of requirements</b>	<b>0</b>	<b>Number of recommendations:</b>	<b>0</b>
-------------------------------	----------	-----------------------------------	----------

#### 4.6 Is the service well led?

Premises related policies and documentation are retained in a manner which is accessible to relevant people.

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 and has been adequately supported and resourced 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.

No areas for improvement were identified during the inspection.

<b>Number of requirements</b>	<b>0</b>	<b>Number of recommendations:</b>	<b>0</b>
-------------------------------	----------	-----------------------------------	----------

## 5.0 Quality improvement plan

Any issues identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Mr James Wilson, registered person, as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/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 provider 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 the residential service. 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 provider meets legislative requirements based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Independent Health Care Regulations (Northern Ireland) 2005.

## 5.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and Minimum Standards for Dental Care and Treatment. They promote current good practice and if adopted by the registered provider/manager may enhance service, quality and delivery.

## 5.3 Actions taken by the registered provider

The QIP should be completed and detail the actions taken to meet the legislative requirements and recommendations stated. The registered provider should confirm that these actions have been completed and return the completed QIP to [Estates.Mailbox@rqia.org.uk](mailto:Estates.Mailbox@rqia.org.uk) for assessment 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 provider 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 provider with the necessary information to assist them to fulfil their responsibilities and enhance practice within the service.

## Quality Improvement Plan

### Recommendations

<p><b>Recommendation 1</b></p> <p><b>Ref:</b> Standard 27.8</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 01 November 2016</p>	<p>The registered provider should ensure that the periodic inspection and testing of the premises 'fixed electrical installation' is undertaken in a timely manner and that any significant findings or defects are implemented within the timescales stipulated in the report.</p>
	<p><b>Response by registered provider detailing the actions taken:</b> Confirmed with electrical contractor that the 5 year periodic inspection to be carried out on schedule and all remedial work identified to be completed as per the requirements of the report.</p>
<p><b>Recommendation 2</b></p> <p><b>Ref:</b> Standard 27.8</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 01 November 2016</p>	<p>The registered provider should ensure that the thermostatic mixing valves (TMV's) installed throughout the premises, are serviced and maintained in accordance with the manufacturer's guidelines and current best practice guidance. Relevant information can be accessed in HSG274 part 2 'The control of legionella bacteria in hot and cold water systems' which is available at: <a href="http://www.hse.gov.uk/pubns/priced/hsg274part2.pdf">http://www.hse.gov.uk/pubns/priced/hsg274part2.pdf</a></p>
	<p><b>Response by registered provider detailing the actions taken:</b> Confirmed with plumbing contractor the TMVs are serviced and maintained in accordance with guidelines and best practice. They will provide written confirmation of this work for records.</p>

*\*Please ensure this document is completed in full and returned to care.team@rqia.org.uk from the authorised email address\**





The Regulation and  
Quality Improvement  
Authority

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@rqla.org.uk](mailto:info@rqla.org.uk)

Web [www.rqla.org.uk](http://www.rqla.org.uk)

📍 @RQIANews

Assurance, Challenge and Improvement in Health and Social Care