

Report for RQIA Inspection IN021185 - 19 January 2015 El Shammah Residential Care Home, Lisburn - RQIA ID 1601

- The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003
- The Residential Care Homes Regulations (Northern Ireland) 2005
- Residential Care Homes Minimum Standards (DHSSPS, August 2011)

I would confirm the following matters with regard to above:

An inspection of El Shammah Residential Care Home was carried out by RQIA on 19 January 2015. Mr Sean Macklin, representing the Registered Responsible Person, along with Mr Adrian McCready, Registered Manager were present during this inspection. This inspection focused specifically on the works undertaken in respect of the Variation 'VA000130' with a view to increasing the number of registered beds in the home from 24 beds to 35 beds. Any requirements or recommendations from previous estates inspections were not looked at during this inspection.

RQIA considers that action is required by the registered persons in relation to item 4, 5 & 7 noted below in order to ensure compliance with the above legislation and standards:

Standard 32 – Premises and grounds

1. The new building works had been completed to a very high standard. All bedroom accommodation was fully furnished and decorated and were ready to receive residents. The home had been redecorated throughout, including new floor finishes in communal areas and corridors. There is also a program in place for the replacement of the floor finishes in the existing bedrooms. This ongoing commitment to the quality of the premises is to be commended.
2. There were no further actions required against this standard as a result of this inspection.

Standard 35 – Safe and healthy working practices

3. By in large, safe and healthy working practices appear evident in the home in accordance with this standard. The premises fixed electrical installation was inspected on 9 December 2014 and is in a 'satisfactory' condition. The top score of '5' was awarded by the local council during their most recent inspection by their Environmental Health department. The home's hot and cold water systems were chemically treated on 20 December 2014. Water samples were taken at this time and analysis of the same found they were 'clear' of legionella bacteria. Monitoring of the thermostatic mixing valves installed in the home is ongoing with the most recent checks undertaken on 19 December 2014. However, two issues were identified for attention by the registered manager.
4. The shelving in the new stores should be suitably sealed in accordance with current infection control best practice.
5. The window restrictors in the new extension were suitably restricted to a 100mm opening. However, these restrictors could be disengaged without the need for any special tool. It is essential that all windows restrictors incorporate suitable security features which cannot be overridden by residents.

Standard 36 – Fire safety

6. Fire Safety procedures in the home are, in the main, generally in line with this standard. Records inspected during the inspection demonstrated good attention to fire safety matters. Alterations to the Home's emergency lighting installation and fire alarm and detection system were undertaken and these systems were commissioned on 9 December 2014. The fire extinguishers were serviced throughout the home on 15 January 2015. However, one issue was identified for attention by the registered manager.
7. Ensure that the fire risk assessment currently in place within the home is suitably reviewed to take onboard the physical changes to the home and the additional residents who will now be accommodated. It is essential that any requirements flowing from this assessment are implemented and signed-off accordingly by the registered manager within the time-scales stipulated.

Action Required by Registered Persons

Items 4, 5 & 7 above identified for action in this report should be addressed in a prioritised and timely manner. These issues will be followed up by RQIA. This may include a further inspection on or before **13 April 2015**.

A detailed response to this inspection report should be returned to this office via email to estates@rqia.org.uk by **13 March 2015**. If you disagree with the factual accuracy of the report you should make a separate response to the above email address in order that amendments can be considered and made or your comments appended.

On **14 March 2015** this inspection report will be made open to the public (bar any communication regarding factual accuracy). If you have not provided a detailed response by this date, this report will still be made open without your comments.

You will be aware that this report and any response you submit will constitute an open report on this establishment and will be made available to interested parties on request. If a detailed response is not received in writing by the required date given above, I would ask you to regard this copy of the report as final and an open document effective from **14 March 2015**.

Thank you for your co-operation.

I look forward to hearing from you.

Regards

Gavin Doherty
Estates Officer

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Quality Improvement Plan

Announced Estates Inspection

El Shammagh Residential Care Home

19 January 2015

QIP Position Based on Comments from Registered Persons (for RQIA use only)		QIP Closed		Estates Officer	Date
		Yes	No		
A.	All items confirmed as addressed.		✓	Gavin Doherty	30/6/2015
B.	All items either confirmed as addressed or arrangements confirmed to address within stated timescales.				
C.	Clarification or follow up required on some items.				

Quality Improvement Plan

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Response for Item 4.

The cupboards concerned are currently not in use and are not planned to be used for residents' linen etc. Should this change the shelves will be sealed before this purpose of use.

Response for Item 5.

Window restricters were checked and any faulty restricters where replaced (25-02-2015).

Response for Item 7.

A fire risk assessment has been carried out by an independent assessor. All relevant requirements pertaining to the extension have been completed. Arrangements are in place to complete requirements made to the existing part of the building.

Please complete the following table to demonstrate that this Quality Improvement Plan has been completed by the Registered Manager and approved by the Registered Responsible Person / Responsible Individual:

NAME OF REGISTERED MANAGER COMPLETING QIP	Adrian McCready
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	Emer Bevan