



The **Regulation** and
Quality Improvement
Authority

El Shammah
RQIA ID: 1601
2 North Circular Road
Lisburn
BT28 3AH

Inspector: **Gavin Doherty**
Inspection ID: **IN021574**

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**Announced Estates Inspection
of
El Shammah**

30 June 2015

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
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1. Summary of Inspection

An announced estates inspection took place on 30 June 2015 from 10.30 to 12.30. 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 actions 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	1	1

The details of the QIP within this report were discussed with Mr Adrian McCready, Registered Manager as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Organisation/Registered Person: Mrs Emer Bevan	Registered Manager: Mr Adrian McCready
Person in Charge of the Home at the Time of Inspection: Mr Adrian McCready	Date Manager Registered: 9 September 2014
Categories of Care: RC-I, RC-PH, RC-PH(E), RC-TI, RC-DE, RC-A, RC-MP(E)	Number of Registered Places: 35
Number of Residents Accommodated on Day of Inspection: 25	Weekly Tariff at Time of Inspection: £500-525

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 Estate's inspection report
- Statutory notifications over the past 12 months

During the inspection the inspector did not meet with any residents, care staff, visiting professionals or residents' representatives.

The following records were examined during the inspection:

- Fire Risk assessment
- Fire Safety service records and in-house log books
- Control of Legionella Risk Assessment and associated records
- Mechanical and Electrical Certificates and associated records
- Service Certificates for the lifting equipment

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the home was an announced care inspection dated 5 February 2015. No requirements or recommendations were made as a result of this inspection and the report was returned and approved by the care inspector on 20 March 2015.

5.2 Review of Requirements and Recommendations from *the last Estates Inspection*

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulation 14 (2)	The shelving in the new stores should be suitably sealed in accordance with current infection control best practice.	Met
	Action taken as confirmed during the inspection: This was confirmed at the time of inspection.	
Requirement 2 Ref: Regulation 14 (2)	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.	Met
	Action taken as confirmed during the inspection: It was confirmed at the time of inspection that suitable window restrictors are now in place that cannot be overridden by residents.	

Requirement 3 Ref: Regulation 27 (4)	Ensure that the fire risk assessment currently in place within the home is suitably reviewed to take on-board 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.	Met
	Action taken as confirmed during the inspection: A suitable risk assessment by a registered fire risk assessment was undertaken on 28 January 2015. The significant findings contained in this report have been actioned and signed-off by the registered manager.	

5.3 Standard 27: Premises and Grounds

Is Care Safe? (Quality of Life)

A range of documentation in relation to the maintenance and upkeep of the premises was presented for review during this Estates inspection. This documentation included inspection and test reports for various elements of the engineering services and risk assessments. This supports the delivery of safe care.

Is Care Effective? (Quality of Management)

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

Is Care Compassionate? (Quality of Care)

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

Areas for Improvement

No areas for improvement were identified as a result of this inspection.

Number of Requirements	0	Number Recommendations:	0
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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. One issue was however identified for attention during this Estates inspection. This is detailed in the 'areas for improvement' section below.

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. One issue was however identified for attention during this Estates inspection. This is 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

A current risk assessment for the control of legionella bacteria in the homes hot and cold water systems was undertaken in November 2013 and comprehensive control measures have subsequently been implemented within the home. The approved code of practice in relation to this important area has been recently updated and new guidance has been issued by the Health and Safety Executive (NI). HSG274 part 2 provides detailed advice and guidance with specific reference to care homes and it is recommended that due regard is given to this new document.

Current gas safe certification for the relevant kitchen and laundry equipment was not available at the time of the inspection. It is essential that this certification is in place and that any remedial works required are fully implemented. Details should be forwarded to RQIA confirming this certification.

Number of Requirements	1	Number Recommendations:	1
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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. 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. This supports the delivery of safe care.

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.

Is Care Compassionate? (Quality of Care)

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

Areas for Improvement

No areas for improvement were identified as a result of this inspection.

Number of Requirements	0	Number Recommendations:	0
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5.6 Additional Areas Examined

No additional areas were examined during this inspection.

6. Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Mr Adrian McCready, Registered Manager as part of 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	Details should be forwarded to RQIA confirming that current gas safe certification for the relevant kitchen and laundry equipment is in place.
Ref: Regulation 27 (2)	
Stated: First time	Response by Registered Manager Detailing the Actions Taken: This was completed by 'Pheonix'. who have been contacted several times and asked to send the relevenat certificate. The manager will continue to seek this documentation and will forward to the RQIA as soon as this has been received. The most recent inspection took place in June 2015.
To be Completed by: 25 August 2015	

Recommendations

Recommendation 1	Ensure that due regard is given to the new guidance recently issued by the Health and Safety Executive (NI) with regards to the control of legionella bacteria in hot and cold water systems. HSG274 part 2 provides detailed advice and guidance with specific reference to care homes.
Ref: Standard 28	
Stated: First time	
To be Completed by: 22 September 2015	Response by Registered Manager Detailing the Actions Taken: The recent guidance has been viewed and the temperature altered to meet with the new recommendations.

Registered Manager Completing QIP	Adrian McCready	Date Completed	06/08/15
Registered Person Approving QIP	Emer Bevan	Date Approved	06/08/15
RQIA Inspector Assessing Response	P Cunningham	Date Approved	*18/8/15

**one issue requiring follow up*