

Announced Premises Inspection Report 21 April 2016



80 Upper Movilla Street

Type of Service: Residential

**Address: 80 Upper Movilla Street
Newtownards, BT23 8JP**

Tel No: 028 9181 8463

Inspector: Colin Muldoon

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

1.0 Summary

An announced premises inspection of Upper Movilla Street took place on 21 April 2016 from 10:30 to 13:30hrs.

Is care safe?

On the day of the inspection the premises supported the delivery of safe care. However some issues were identified for attention by the registered person. 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:

- Standard 27: Premises and Grounds
- Standard 28: Safe and Healthy working Practices
- Standard 29: Fire Safety

1.1 Inspection outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	0	3

Details of the QIP within this report were discussed with Ms Margaret Crilly (Registered Manager) and Mr Hugh Maxwell (Praxis Health and Safety Manager), as part of the inspection process. The timescales for completion commence from the date of 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 last inspection.

2.0 Service Details

Registered organisation/registered person: Praxis Care Group/Challenge Mrs I Sloan (Registered Responsible Person)	Registered manager: Ms Margaret Crilly
Person in charge of the home at the time of inspection: Ms Margaret Crilly	Date manager registered: Ms Margaret Crilly Application received - "registration pending".
Categories of care: RC-LD, RC-LD(E)	Number of registered places: 3

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 Ms Margaret Crilly (Registered Manager) and Mr Hugh Maxwell (Praxis Health and Safety Manager).

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, fire risk assessment.

4.0 The Inspection

4.1 Review of requirements and recommendations from the previous inspection dated 25/02/2016

The previous inspection of the home was an unannounced care inspection. No requirements or recommendations were made as a result of that inspection.

4.2 Review of requirements and recommendations from the last premises inspection dated 30/04/2013

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulation 14.-(2)(c) Stated: First time	The safety of the first floor windows requires to be reviewed. The review and subsequent actions should be in line with advice from the health and safety advisor and safety alert MDEA(NI)2007/100.	Met
	Action taken as confirmed during the inspection: Restrictors were fitted to the windows following the previous Estates inspection. The risk assessment was subsequently reviewed by the manager and the restrictors were removed. The restriction of windows was discussed with the manager and health and safety manager who confirmed that the assessment of risk is kept under continual review.	
Requirement 2 Ref: Regulation 14.-(2)(c) Stated: First time	The measures set out in the scheme for controlling legionella must be fully implemented.	Met
	Action taken as confirmed during the inspection: There were records of the actions being taken in relation to a scheme for the control of legionella.	
Requirement 3 Ref: Regulation 14.-(2)(c) Stated: First time	The temperature and safety of the hot water accessible to residents must be assessed. Any measures necessary to control these outlets to a safe temperature must be put in place. Reference should be made to Health Guidance Note ' <i>Safe hot water and surface temperatures</i> '.	Met
	Action taken as confirmed during the inspection: Thermostatic mixing valves have been installed and there are arrangements for the valves to be serviced.	

<p>Requirement 4</p> <p>Ref: Regulation 27.-(4)(a)</p> <p>Stated: First time</p>	<p>It should be confirmed that the guidance contained in the current version of NIHTM84 was used in the fire risk assessment</p> <hr/> <p>Action taken as confirmed during the inspection: The Health and Safety Manager, who carries out the fire risk assessment, was present during the inspection and he confirmed that the reference was made to NIHTM84 during the review of the fire risk assessment.</p>	Met
<p>Requirement 5</p> <p>Ref: Regulation 27.-(4)(d)(i)</p> <p>Stated: First time</p>	<p>The necessary upgrading work should be carried out to make all fire doors FD30S standard.</p> <hr/> <p>Action taken as confirmed during the inspection: Completed.</p>	Met
<p>Requirement 6</p> <p>Ref: Regulations 27.-(4)(c) 27.-(4)(d)(i)</p> <p>Stated: First time</p>	<p>The door from the dining room into the hall must be repaired or replaced so that it fits tight to the frame and stops to provide FD30S fire protection.</p> <hr/> <p>Action taken as confirmed during the inspection: Completed.</p>	Met
<p>Requirement 7</p> <p>Ref: Regulation 27.-(4)(d)(iv)</p> <p>Stated: First time</p>	<p>It should be confirmed that the maintenance of the fire detection and alarm system is up to date.</p> <hr/> <p>Action taken as confirmed during the inspection: The last service of the fire alarm and detection system was carried out on 07 January 2016.</p>	Met

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. On the day of inspection the fire risk assessor (Health and Safety Manager) confirmed that the standard referenced during the review of the fire risk assessment was NIHTM84.

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. A number of fire drills have been carried out over the last year and a system has been established for creating a report on each occasion. There are 15 staff involved in providing care in the home and some, but not all, have been involved in the drills. Refer to recommendation 1 in Quality Improvement Plan.
2. The measures in place for controlling legionella were discussed. The manager confirmed that the arrangements for monitoring water temperatures would be reviewed to ensure that readings in line with good practice were obtained consistently. A contractor has recently serviced the thermostatic mixing valves. His report advises that the valve filters were found to be dirty. The manager stated that arrangements have been made for the cold water storage tank to be cleaned and disinfected following which the TMV filters would be cleaned again. Refer to recommendation 2 in Quality Improvement Plan.
3. The fire risk assessment and reviews are carried out by the Praxis Health and Safety Manager who has had training in fire safety and fire risk assessment although is not accredited as defined in the letters issued by RQIA on 02 April 2015 and 31 January 2013. Refer to recommendation 3 in Quality Improvement Plan.

Number of requirements:	0	Number of recommendations:	3
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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.

Number of requirements:	0	Number of recommendations:	0
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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.

Number of requirements:	0	Number of recommendations:	0
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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.

Number of requirements:	0	Number of recommendations:	0
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5.0 Quality Improvement Plan

The issues identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Ms Margaret Crilly (Registered Manager) and Mr Hugh Maxwell (Praxis Health and Safety 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.

5.1 Statutory requirements

This section outlines the actions which must be taken so that the registered person/manager meets legislative requirements based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Residential Care Homes Regulations (Northern Ireland) 2005.

5.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and The Residential Care Homes Minimum Standards 2011. They promote current good practice and if adopted by the registered person may enhance service, quality and delivery.

5.3 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 should review and approve the QIP to confirm that these actions have been completed by the registered manager. Once fully completed, the QIP should 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 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 person/manager 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 person/manager with the necessary information to assist them to fulfil their responsibilities and enhance practice within the service.

Quality Improvement Plan

Recommendations

<p>Recommendation 1</p> <p>Ref: Standard 29</p> <p>Stated: First time</p> <p>To be Completed by: Ongoing</p>	<p>Arrangements should be made which will ensure that all staff who work in the home participate in practice fire drills.</p> <p>Reference should be made to Firecode document NIHTM84 – <i>Fire risk assessment in residential care premises</i>.</p>
	<p>Response by Registered Manager Detailing the Actions Taken:</p> <p>Fire Drills will be completed during team meetings to ensure that all staff all staff who work in the home participate in evacuation practice.</p>
<p>Recommendation 2</p> <p>Ref: Standard 27</p> <p>Stated: First time</p> <p>To be Completed by: Ongoing</p>	<p>It should be confirmed to RQIA when the cleaning of the cold water storage tanks and thermostatic mixing valves filters is completed.</p>
	<p>Response by Registered Manager Detailing the Actions Taken:</p> <p>Chlorination of water tank was completed 09/05/16 and primary cleaning of thermostatic mixing valves was completed 20/04/16 with secondary cleaning completed 24/06/16 both the Chlorination of water tank and secondary cleaning of thermostatic mixing valves required no residual work.</p>
<p>Recommendation 3</p> <p>Ref: Standard 29</p> <p>Stated: First time</p> <p>To be Completed by: Ongoing</p>	<p>RQIA recommend that the person carrying out the next review of the fire risk assessment should hold professional body registration or third party certification for fire risk assessment and be registered accordingly with the relevant body.</p> <p>Reference should be made to correspondence issued by RQIA to all registered homes on 13 January 2013 and 02 April 2015 and the guidance contained in:</p> <p>http://www.rqia.org.uk/cms_resources/Competence%20of%20persons%20carrying%20out%20Fire%20Risk%20Assessment.pdf</p> <p>http://www.rqia.org.uk/cms_resources/A%20Guide%20to%20Choosing%20a%20Competent%20Fire%20Risk%20Assessor.pdf</p>
	<p>Response by Registered Manager Detailing the Actions Taken:</p> <p>Within the terms of the document referred to by the RQIA: 'The Fire Risk Assessment Competency Council' document (A Guide to Choosing a Competent Risk Assessor), under the section 'Can I do it myself?' Praxis Care is fully satisfied that 80 Upper Movilla Street, Newtownards, falls within the category of a 'small, low risk premises'. The same guidance also clearly state that: "Doing the assessment in house has the advantage of ensuring that you own and understand the precautions you need to take to protect people adequately".</p> <p>On that bases Praxis Care is also fully satisfied that our Health & Safety/Fire Safety Manager (Hugh Maxwell) is sufficiently experienced, qualified and competent to enable him to carry out fire risk assessments within these 'small, low risk' premises under the terms of Part 3 of the Fire and Rescue Services (Northern Ireland) Order 2006 and the Fire Safety Regulations (Northern Ireland) 2010. In addition it is confirmed</p>

	<p>that our Health & Safety/ Fire Safety Manager has over 25 years experience in the Health & Safety/Fire Safety sector within a diverse range of work environments. He also holds a recognised British Safety Council award in fire risk assessment which required him to submit a number of previously completed Praxis Care sample fire risk assessment reports for their consideration and he is currently an Associate Member of the Institute of Fire Safety Managers (AIFSM). Since the new legislation came into force on 15th November 2010 our premises and fire risk assessments have been periodically inspected by Northern Ireland Fire and Rescue Service 'Fire Safety Inspectors' (defined under Article 33(3) of the Fire and Rescue Services (Northern Ireland) Order 2006 as "a fire and rescue officer who is authorised in writing by the Chief Fire Officer") and to date we have received no adverse comments in relation to the content, quality or standard of fire risk assessment reports completed by our Health & Safety/Fire Safety Manager.</p>		
Registered Manager Completing QIP	Margaret Crilly2	Date Completed	4/06/16
Registered Person Approving QIP	Andy Mayhew	Date Approved	24/06/16
RQIA Inspector Assessing Response	C Muldoon	Date Approved	29/06/2016

Please ensure this document is completed in full and returned to estates.mailbox@rqia.org.uk from the authorised email address



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