



The Regulation and  
Quality Improvement  
Authority

**THE REGULATION AND QUALITY IMPROVEMENT  
AUTHORITY**

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**ANNOUNCED ESTATES INSPECTION**

<b>Inspection No:</b>	IN018073
<b>Establishment ID No:</b>	1695
<b>Name of Establishment:</b>	SENSE Residential Care Home, Carrickfergus
<b>Date of Inspection:</b>	10 July 2014
<b>Inspector's Name:</b>	K. Monaghan

## 1.0 GENERAL INFORMATION

<b>Name of Home:</b>	SENSE Residential Care Home
<b>Address:</b>	41 Edenvale Avenue Eden Carrickfergus BT38 7NP
<b>Telephone Number:</b>	028 93 36 27 92
<b>Registered Responsible Individual:</b>	Mrs. Collette Gray, SENSE
<b>Registered Manager:</b>	Mr. Patrick Black (Acting)
<b>Person in Charge of the Home at the time of Inspection:</b>	Mr. Patrick Black, Acting Manager
<b>Other person(s) present during inspection:</b>	N/A
<b>Type of establishment:</b>	Residential Care Home
<b>Categories of Care:</b>	RC-SI
<b>Conditions of Registration:</b>	To include people with physical disabilities and / or learning disabilities.
<b>Number of Residents:</b>	10
<b>Date and time of inspection:</b>	10 July 2014 (10:30am – 12:15pm.)
<b>Date of previous Estates inspection:</b>	27 September 2011
<b>Name of Inspector:</b>	K. Monaghan

## **2.0 INTRODUCTION**

The Regulation and Quality Improvement Authority (RQIA) is empowered under the Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 to inspect residential care homes.

This is a report of an announced inspection to assess the quality of the premises and grounds in which the service is being provided including the upkeep of the building and engineering services and equipment. The report details the extent to which the standards measured during inspection were met.

## **3.0 PURPOSE OF THE INSPECTION**

The purpose of this inspection was to consider whether the premises and grounds were safe, well maintained and remain suitable for their stated purpose in compliance with legislative requirements and current minimum standards. This was achieved through a process of evaluation of available evidence.

The Regulation and Quality Improvement Authority aims to use inspection to support providers in improving the quality of services, rather than only seeking compliance with regulations and standards.

The aims of the inspection were to examine the estates related policies, practices and monitoring arrangements for the provision of Residential Care homes, and to determine the provider's compliance with the following:

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

Other published standards which guide best practice may also be referenced during the Inspection process.

## **4.0 METHODS/PROCESS**

Specific methods/processes used in this inspection include the following:

- Discussions with Mr. Patrick Black, Acting Manager
- Examination of records
- Inspection of the home internally and externally. Residents' private bedrooms were only inspected when unoccupied and permission was granted.
- Evaluation and feedback

Any other information received by RQIA about this regulated establishment has also been considered by the Inspector in preparing this inspection report.

## **5.0 CONSULTATION PROCESS**

During the course of the inspection the Inspector spoke Mr. Patrick Black, Acting Manager.

## **6.0 INSPECTION FOCUS**

The inspection sought to establish the level of compliance achieved with respect to the following DHSSPS Residential Care Homes Minimum Standards and to assess progress with the issues raised during and since the previous Estates inspection:

### **Standards inspected:**

- Standard 27 - Premises and grounds
- Standard 28 - Safe and healthy working practices
- Standard 29 - Fire Safety

## **7.0 PROFILE OF SERVICE**

Sense Voluntary Residential Home is run by Sense, the National Deaf, Blind and Rubella Association which is a registered charity, formed in 1995 to work with and provide for people with deaf / blindness and associated disabilities. Some of the residents who live in the residential home may not be totally deaf and totally blind but will have some use of one or both senses. Others will also have additional physical and / or learning disabilities as well.

The home is situated in a residential area in Eden village which is a short distance from Carrickfergus, off street parking facilities are available. Sense Voluntary Residential Home consists of two purpose built bungalows located on the same site with five residents residing in each unit. Bungalow 41a provides accommodation and care for people who require a high level of support while Bungalow 41b provides accommodation and care for people who are more independent.

Each resident has their own room with en-suite facilities and both bungalows provide communal areas ie lounge, dining room, kitchen and bathroom facilities. One of the bungalows provides sleeping accommodation and an office for staff. The bungalows are connected by an open courtyard with an attractive sensory garden with raised beds for flowers and herbs.

## 8.0 SUMMARY

Following this Estates Inspection of The SENSE Residential Care Home in Carrickfergus on 10 July 2014, improvements are required to comply with the Residential Care Homes Regulations (Northern Ireland) 2005 and the criteria outlined in the following standards:

- Standard 27 - Premises and grounds
- Standard 28 - Safe and healthy working practices
- Standard 29 - Fire Safety

This resulted in ten requirements. These are outlined in the quality improvement plan appended to this report.

The Estates Inspector would acknowledge the assistance of Mr. Patrick Black, Acting Manager, throughout the inspection.

## 9.0 INSPECTION FINDINGS

### 9.1 Recommendations and requirements for the previous Estates inspection on 27 September 2011:

- 9.1.1 The previous Estates inspection to this home was carried out on 27 September 2011. The following issues should be noted with regard to the issues included in the Quality Improvement Plan for the previous Estates inspection that was carried out on 27 September 2011:
- 9.1.2 The water systems were cleaned and disinfected on 07 May 2013. The water temperatures at the sentinel outlets were also being checked and recorded on a monthly basis with the most recent check having been completed on 03 July 2014. Records for the quarterly descaling and disinfection of the showers, the six monthly inspections of the water storage tanks and the ongoing maintenance of the thermostatic mixing valves were not presented for review during this Estates inspection. These records should be followed up and retained in the home available for review during future inspections. Reference should be made to item 4 in the Quality Improvement Plan.
- 9.1.3 The fixed wiring installation was re-inspected and re-tested recently. The report for this work was still pending at the time of this Estates inspection. This report should be followed up and actioned as required. A copy of this report and the documentation to support the completion of any remedial works should be retained in the home available for review during future inspections. Reference should be made to item 5 in the Quality Improvement Plan.

## 9.0 INSPECTION FINDINGS CONTINUED

### 9.1 Recommendations and requirements for the previous Estates inspection on 27 September 2011 continued:

- 9.1.4 The position in relation to the remedial works to the water controls for bedroom 4 was not clear. This should be clarified. Reference should be made to item 4 in the Quality Improvement Plan.
- 9.1.5 The wall tiling in some of the ensuite facilities had been replaced. There was however an issue to be resolved in relation to the wall tiling in bedroom 5 in Bungalow A .This should be resolved. Reference should be made to item 1 in the Quality Improvement Plan.
- 9.1.6 The door to the kitchen in Bungalow A was not closing effectively with the self-closer. The fire doors should be inspected and any remedial works required should be completed. The remedial works should include completion of further adjustments to the kitchen door. Reference should be made to item 8 in the Quality Improvement Plan.
- 9.1.7 The above issues where appropriate are detailed in the relevant sections of the Quality Improvement Plan.

### 9.2 **Standard 27 - Premises and grounds** - *The premises and grounds are safe, well maintained and remain suitable for their stated purpose*

- 9.2.1 A number of issues were identified for attention during this Estates inspection in relation to this standard as follows:
- 9.2.2 The doors for the new ensuite shower and toilet facilities for bedroom 3 in Bungalow A should be fitted. The lighting fittings in bedroom 2 in Bungalow B should also be upgraded. Reference should be made to item 2 in the Quality Improvement Plan.
- 9.2.3 The shower seat in the ensuite facility for bedroom 5 in Bungalow A should be replaced (rusting). Reference should be made to item 2 in the Quality Improvement Plan.
- 9.2.4 The shrub bed in the center of the rear garden was not in a good condition. This should be made good. Reference should be made to item 2 in the Quality Improvement Plan.

## 9.0 INSPECTION FINDINGS CONTINUED

### 9.2 Standard 27 - Premises and grounds continued

- 9.2.5 The décor in some areas required attention. Mr. Black confirmed that arrangements had been made to redecorate bedroom 4A in Bungalow A in the week following this Estates inspection. The floor covering in the ensuite facility for this bedroom should also be replaced. In addition to the works to be undertaken in bedroom 4A, an overall review of the standard of décor in the premises should be completed and a programme of redecoration with firm timescales should be drawn up. A copy of this programme should be forwarded to RQA. Reference should be made to item 3 in the Quality Improvement Plan.
- 9.2.6 The kitchen units in Bungalow A were showing signs of wear. A review of this kitchen should be carried out and a programme of upgrading should be developed. Details of this programme should be confirmed to RQIA. Reference should be made to item 3 in the Quality Improvement Plan.
- 9.2.7 The above issues where appropriate are detailed in the section of the Quality Improvement Plan entitled 'Standard 27 – Premises and Grounds.

### 9.3 Standard 28 – Safe and healthy working practices – *The home is maintained in a safe manner*

- 9.3.1 A number of issues were identified for attention during this Estates inspection in relation to this standard as follows:
- 9.3.2 A new ensuite shower facility had recently been provided for bedroom 3 in Bungalow A. It was not clear if the shower unit was fitted with a DO8 Type 3 fail-safe thermostatic mixing valve. This should be clarified. Reference should be made to item 6 in the Quality Improvement Plan.
- 9.3.3 A risk assessment for the prevention or control of legionella bacteria in the water systems was carried out in September 2012. Since then new ensuite facilities have been provided for bedroom 3 in Bungalow A. The legionella bacteria risk assessment should be reviewed, updated and actioned as required. In addition the action plan in the report for the legionella risk assessment that was completed in September 2012 should be signed off. Reference should be made to item 6 in the Quality Improvement Plan.

## 9.0 INSPECTION FINDINGS CONTINUED

### 9.3 Standard 28 – Safe and healthy working practices continued

- 9.3.4 The satellite television cables at the boiler room should be refixed in position. Reference should be made to item 7 in the Quality Improvement Plan.
- 9.3.5 The above issues are detailed as appropriate in the section of the attached Quality Improvement Plan entitled 'Standard 28 - Safe and healthy working practices'.

### 9.4 Standard 29: Fire safety - *Fire safety precautions are in place that reduce the risk of fire and protect patients, staff and visitors in the event of fire.*

- 9.4.1 A number of issues were identified for attention during this Estates inspection in relation to this standard as follows:
- 9.4.2 The fire risk assessment for the premises was reviewed and updated on 03 July 2014. Although the report for this risk assessment was still pending, Mr. Black confirmed that no significant fire safety issues had been identified for action. This report should be followed up and retained in the home available for review during future inspections. Reference should be made to item 9 in the Quality Improvement Plan.
- 9.4.3 The door to the office in Bungalow A should not be wedged open. If this door is required to be held open an appropriate hold open device linked to the fire detection and alarm system should be installed. Reference should be made to item 9 in the Quality Improvement Plan.
- 9.4.4 The boiler room should be cleared out and brushed clean. Reference should be made to item 9 in the Quality Improvement Plan.
- 9.4.5 The fire detection and alarm system was inspected and tested on 29 May 2014. Mr. Black advised that there was an issue to be resolved in relation to the fastening on the front door to bungalow B. Confirmation of completion in relation to this issue should be provided to RQIA. Reference should be made to item 10 in the Quality Improvement Plan.



## **9.0 INSPECTION FINDINGS CONTINUED**

### **9.4 Standard 29: Fire safety continued**

- 9.4.6 Mr. Black confirmed that the staff had completed e-learning fire safety training on various dates in 2014 with further training due to be completed in July 2014. Delivering the training by e-learning alone would not generally be considered adequate for this type of environment. A review in relation to how the fire safety training is being delivered should be completed. Consideration should be given in this review to achieving the correct balance between e-learning, face to face training and practical demonstrations. The outcome of this review should be confirmed to RQIA. Reference should be made to item 10 in the Quality Improvement Plan.
- 9.4.7 The emergency lights were inspected and tested on 6 February 2014. This inspection and test identified some issues that required attention. It was not however clear if these issues had been addressed. Completion of these issues should be confirmed to RQIA. Reference should be made to item 10 in the Quality Improvement Plan.
- 9.4.8 The above issues are detailed as appropriate in the section of the attached Quality Improvement Plan entitled 'Standard 29: Fire safety'.

## **10.0 QUALITY IMPROVEMENT PLAN**

The details of the Quality Improvement plan appended to this report were discussed with Mr. Patrick Black, Acting Manager, as part of the inspection process.

The timescales commence from the date of inspection.

Requirements are based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 and The Residential Homes Regulations (Northern Ireland) 2005 and must be met.

Recommendations are based on the Department of Health, Social Services and Public Safety's minimum standards for registration and inspection, promote current good practice and should be considered by the management of the nursing home to improve the quality of life experienced by residents.

The registered provider is required to record comments on the quality improvement plan.

## **11.0 ENQUIRIES**

Enquiries relating to this report should be addressed to:

**Regulation and Quality Improvement Authority**  
**9th Floor**  
**Riverside Tower**  
**5 Lanyon Place**  
**BELFAST**  
**BT1 3BT**



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## Quality Improvement Plan

### Announced Estates Inspection

**The SENSE Residential Care Home, Carrickfergus RQIA ID 1695**

**10 July 2014**

QIP Position Based on Comments from Registered Persons			QIP Closed		Estates Officer	Date
			Yes	No		
A.	All items confirmed as addressed.					
B.	All items either confirmed as addressed or arrangements confirmed to address within stated timescales.					
C.	Clarification or follow up required on some items.	√	–	√	K. Monaghan	25 September 2014

**NOTES:**

The details of the quality improvement plan were discussed with Mr. Patrick Black, Acting Manager as part of the inspection process.

The timescales commence from the date of inspection. Requirements are based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 and The Residential Homes Regulations (Northern Ireland) 2005 and must be met.

Recommendations are based on the Department of Health, Social Services and Public Safety's minimum standards for registration and inspection, promote current good practice and should be considered by the management of the residential home to improve the quality of life experienced by residents.

The registered provider is required to record comments on the quality improvement plan.

The quality improvement plan is to be signed below by the registered provider and registered manager and returned to:

**Please complete the following table to demonstrate that this Quality Improvement Plan has been completed by the registered manager and approved by the responsible person / identified responsible person:**

<b>NAME OF REGISTERED MANAGER COMPLETING QIP</b>	Patrick Black
<b>NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP</b>	Colette Gray

## Standard 27 – Premises and grounds

The following requirements should be noted for action in relation to Standard 27 – Premises and Grounds

Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
1.	Regulation 27(2)(b)	The issue in relation to the wall tiling in bedroom 5 in Bungalow A should be resolved. Reference should be made to paragraph 9.1.5 in the Report.	1 Month	<b>The wall tiling in bedroom 5 has now been completed</b>
2.	Regulation 27(2)(b)	The doors for the new ensuite shower and toilet facilities for bedroom 3 in Bungalow A should be fitted. The lighting fittings in bedroom 2 in Bungalow 2 should also be upgraded. The shower seat in the ensuite facility for bedroom 5 in Bungalow A should be replaced. The shrub bed in the center of the rear garden should be made good. Reference should be made to paragraphs 9.2.2, 9.2.3 and 9.2.4 in the Report.	1 Month	<b>This has been discussed with Habinteg Housing Association who are liaising with the OT due to a change in the overhead hoist positioning. The shower seat in ensuite of bedroom 5 has been replaced. A work order has been raised for light fittings in bedroom 2 to be completed by 29/09/14. Work on repaving the shrub area will commence in approximately 2 weeks.</b>

## Standard 27 – Premises and grounds

The following requirements should be noted for action in relation to Standard 27 – Premises and Grounds

Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
3.	Regulation 27(2)(c) 27(2)(d)	An overall review of the standard of décor in the premises should be completed and a programme of redecoration with firm timescales should be drawn up. A copy of this programme should be forwarded to RQA. A review of the kitchen should be carried out a programme of upgrading should be developed. Details of this programme should be confirmed to RQIA. Reference should be made to paragraphs 9.2.5 and 9.2.6 in the Report.	2 Months	<b>A review of the décor in the premises has taken place and a copy has been sent to RQIA. A review of the kitchen has been carried out and we are in the progress of getting plans drawn up and costings for a refit. Final confirmation will be forwarded to RQIA upon receipt</b>

## Standard 28 - Safe and healthy working practices

The following requirements should be noted for action in relation to Standard 28 - Safe and healthy working practices:

Item	Regulation Reference	Restated Requirements	Timescale	Details Of Action Taken By Registered Person (S)
4.	Regulations 13(7) 14(2)(a) 14(2)(c) 27(2)(q)	The records for the quarterly descaling and disinfection of the showers, the six monthly inspections of the water storage tanks and the ongoing maintenance of the thermostatic mixing valves should be followed up and retained in the home available for review during future inspections. The position in relation to the remedial works to the water controls for bedroom 4 should also be clarified. Reference should be made to paragraphs 9.1.2 and 9.1.4 in the Report.	1 Month	<b>Clarification is being sought from the Sense estates team in relation to the quarterly descaling and disinfection of showers. Habinteg advised Sense during a meeting on 29/08/14 that a new contractor has been appointed to carry out the 6 monthly inspections of the water storage tanks and maintenance of the thermostatic mixing valves. A work order has been raised for completion by 05/09/14 to review the water controls for bedroom 4.</b>
5.	Regulations 14(2)(a) 14(2)(c) 27(2)(q)	The report for the recent inspection and test to the fixed wiring installation and the documentation to support the completion of any remedial works should be retained in the home available for review during future inspections. Reference should be made to paragraph 9.1.3 in	1 Month	<b>At a meeting with Habinteg on 29/08/14, it became apparent that a work order was raised for this earlier in the year but was not completed. A new work order for completion by 29/09/14 has been</b>

		the Report.		<b>raised. The manager discussed with Habinteg the urgency to get this completed before this timescale.</b>
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## Standard 28 - Safe and healthy working practices

The following requirements should be noted for action in relation to Standard 28 - Safe and healthy working practices:

Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
6.	Regulations 13(7) 14(2)(a) 14(2)(c) 27(2)(q)	The Registered Persons should confirm to RQIA that the new shower unit in the ensuite facility for bedroom 3 Bungalow A has been fitted with a DO8 Type 3 fail-safe thermostatic mixing valve. The legionella bacteria risk assessment should be reviewed, updated and actioned as required. In addition the action plan in the report for the legionella risk assessment that was completed in September 2012 should be signed off. Reference should be made to paragraphs 9.3.2 and 9.3.3 in the Report.	1 Month	<b>Habinteg have given reassurance that this will be confirmed with the contractor who fitted it or by reassessment by the new contractor.</b> <b>Habinteg advised Sense during a meeting on 29/08/14 that a new contractor has been appointed to review and update the legionella risk assessment and carry out any necessary actions including those identified in previous risk assessment.</b>
7.	Regulations	The satellite television cables at the boiler room	1 Month	<b>Arrangements have been made to</b>



	14(2)(a) 14(2)(c) 27(2)(c)	should be refixed in position. Reference should be made to paragraph 9.3.4 in the Report.		<b>have this completed within the next 2 weeks</b>
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## Standard 29 – Fire safety

The following requirements should be noted for action in relation to Standard 28 – Fire Safety:

Item	Regulation Reference	Restated Requirements	Timescale	Details Of Action Taken By Registered Person (S)
8.	Regulations 27(4)(b) 27(4)(c) 27(4)(d)(iv)	The fire doors should be inspected and any remedial works required should be completed. The remedial works should include completion of further adjustments to the kitchen door in Bungalow A. Reference should be made to paragraph 9.1.6 in the Report.	1 Month	<b>A work order has been raised and Habinteg have agreed to send a copy of this to Sense by Mon 1<sup>st</sup> Sept. Again the manager stressed the urgency of this being completed.</b>
Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
9.	Regulations 27(4)(a) 27(4)(b) 27(4)(c) 27(4)(d)(iv)	The report for the fire risk assessment that was completed on 03 July 2014 should be followed up and retained in the home available for review during future inspections. The door to the office in Bungalow A should not be wedged open. If this door is required to be held open an	1 Month & Ongoing	<b>The fire risk assessment report has been given to Sense and is available for future inspections. There is a review with the Sense estates team, of the need for installation of additional hold open</b>

		appropriate hold open device linked to the fire detection and alarm system should installed. The boiler room should be kept clear and brushed clean. Reference should be made to paragraphs 9.4.2, 9.4.3 and 9.4.4 in the Report.		<b>devices linked to the fire detection and alarm system. The boiler house has now been cleared and brushed clean.</b>
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## Standard 29 – Fire safety

The following requirement s should be noted for action in relation to Standard 28 – Fire Safety:

Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
10.	Regulations 27(4)(b) 27(4)(c) 27(4)(d)(iv) 27(4)(e)	The Registered Persons should confirm completion of the issue in relation to the fastening on the front door to bungalow B and the current position in relation to the completion of the issues identified for attention in the report for the inspection and test of the emergency lights that was completed on 6 February 2014. A review in relation to how the fire safety training is being delivered should be completed. Consideration should be given in this review to achieving the correct balance between e-learning, face to face training and practical demonstrations. The outcome of this review should be confirmed to RQIA. Reference should be made to paragraphs 9.4.5, 9.4.6 and 9.4.7 in the Report	1 Month	<b>In relation to the fastening of the front door on bungalow B to the fire panel, Habinteg has assured Sense that a work order will be raised and again the manager stressed the urgency of this being completed. A work order has been raised for review of the inspection and test of the emergency lighting. A review of fire safety training is being undertaken by the national training team to ensure the correct balance between e-learning, face-to-face training and practical demonstrations. This will be</b>

			<b>forwarded to RQIA</b>
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