

Announced Premises Inspection Report 06 October 2016



Bardan Cottage Dunmurry

Type of service: Day Care Service
Address: 265-267 Kingsway, Dunmurry, Belfast, BT17 9NP
Tel No: 028 9061 8869
Inspector: Gavin Doherty

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

1.0 Summary

An announced premises inspection of Bardan Cottage Dunmurry took place on 06 October 2016 from 10:30 to 12:00.

The inspection sought to assess progress with any issues raised during and since the last premises inspection and to determine if the day care setting 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 Day Care Settings Regulations (Northern Ireland) 2007 and The Day Care Settings Minimum Standards (DHSSPS, 2012).

1.1 Inspection outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	0	2

Details of the Quality Improvement Plan (QIP) within this report were discussed with Mrs Louise Harte, Acting Manager, 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 previous QIP there were no further actions required to be taken following the most recent premises inspection.

2.0 Service Details

Registered organisation/registered person: GL Care LLP/Mr Liam John Lavery	Registered manager: N/A
Person in charge of the home at the time of inspection: Mrs Louise Harte	Date manager registered: Mrs Louise Harte - application received - "registration pending".
Categories of care: DCS-I, DCS-DE, DCS-PH	Number of registered places: 20

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 Mrs Louise Harte, Acting 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, and fire risk assessment.

4.1 Review of requirements and recommendations from the most recent inspection dated 12/01/16

The most recent inspection of the day care setting was an unannounced care inspection. The completed QIP was returned on 26 January 2016. This QIP will be validated by the specialist inspector at their next inspection.

4.2 Review of requirements and recommendations from the last premises inspection dated 02/06/15

Last care inspection statutory requirements		Validation of compliance
Requirement 1 Ref: Regulation 26(2) Stated: First time	Ensure all bare timber shelving is suitably sealed in accordance with current infection control best practice guidance.	Met
	Action taken as confirmed during the inspection: Inspector confirmed this requirement had been met at the time of inspection.	

Requirement 2 Ref: Regulation 26(2) Stated: First time	Ensure the COSHH store located in the laundry is completed.	Met
	Action taken as confirmed during the inspection: Inspector confirmed this requirement had been met at the time of inspection.	
Requirement 3 Ref: Regulation 26(2) Stated: First time	Ensure that a base unit is provided under the sink unit in the activity room to cover/protect the exposed pipework.	Met
	Action taken as confirmed during the inspection: Inspector confirmed this requirement had been met at the time of inspection.	
Requirement 4 Ref: Regulation 26(4) Stated: First time	Ensure that the period between servicing of the fire detection and alarm system does not exceed 6 months.	Met
	Action taken as confirmed during the inspection: Inspector confirmed this requirement had been met at the time of inspection.	

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.

This supports the delivery of safe care.

Two 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 day centre has a current risk assessment, dated 22 May 2015, and written scheme in place for the control of legionella bacteria in the premises hot and cold water systems. The premises 'sentinal' tap outlets are identified and the temperatures at these outlets are monitored. However, these temperature checks should be extended to include the hot water flow and return from the premises calorifier in accordance with the latest best practice guidance provided by the Health and Safety Executive. This is available for download at the following address:
www.hse.gov.uk/pubns/priced/hsg274part2.pdf
(Recommendation 1 in the attached Quality Improvement Plan)
2. The most recent report of 'thorough examination' for the patient hoist was not available in the premises at the time of the inspection. Confirmation should be provided that this important inspection required under the 'Lifting Operations, Lifting Equipment Regulations', has been undertaken and any requirements implemented.
(Recommendation 2 in the attached Quality Improvement Plan)

Number of requirements	0	Number of recommendations:	2
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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.

No areas for improvement were identified during the inspection.

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 where appropriate.

This supports the delivery of compassionate care.

No areas for improvement were identified during the inspection.

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.

No areas for improvement were identified during the inspection.

Number of requirements	0	Number of recommendations:	0
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5.0 Quality improvement plan

Any issues identified during this inspection are detailed in the QIP. Details of this QIP were discussed with **Mrs Louise Harte, Acting Manager** 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 day care setting. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises, 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 Day Care Settings Regulations (Northern Ireland) 2007

5.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and The Day Care Settings Minimum Standards (DHSSPS, 2012). 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 Provider

The QIP should be completed and detail the actions taken to meet the legislative requirements stated. The registered provider should confirm that these actions have been completed and return completed QIP to 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>Recommendation 1</p> <p>Ref: Standard 25.7</p> <p>Stated: First time</p> <p>To be completed by: 1 December 2016</p>	<p>The registered provider should ensure that the temperatures of the hot water flow and return from the premises calorifier are monitored in accordance with the latest best practice guidance provided by the Health and Safety Executive. This is available for download at the following address: www.hse.gov.uk/pubns/priced/hsg274part2.pdf</p> <p>Response by registered provider detailing the actions taken: This work has been carried out by a plumber and certificates attached to QIP, and will continue to be monitored.</p>
<p>Recommendation 2</p> <p>Ref: Standard 25.7</p> <p>Stated: First time</p> <p>To be completed by: 1 December 2016</p>	<p>The registered provider should confirm that the thorough examination of the premises patient hoist, required under the 'Lifting Operations, Lifting Equipment Regulations', has been undertaken and any requirements implemented.</p> <p>Response by registered provider detailing the actions taken: An contract has been put in place to ensure regular examinations are carried out on hoist. Certificates attached to QIP</p>

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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