



The Regulation and  
Quality Improvement  
Authority

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BT23 5DW

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**Announced Estates Inspection  
of  
Mount Alexander House**

**14 May 2015**

The Regulation and Quality Improvement Authority  
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT  
Tel: 028 9051 7500 Fax: 028 9051 7501 Web: [www.rqia.org.uk](http://www.rqia.org.uk)

## 1. Summary of Inspection

An announced estates inspection took place on 14 May 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
<b>Total number of requirements and recommendations made at this inspection</b>	0	1

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

## 2. Service Details

<b>Registered Organisation/Registered Person:</b> South Eastern HSC Trust	<b>Registered Manager:</b> Ms Angeline Taylor
<b>Person in Charge of the Home at the Time of Inspection:</b> Ms Angeline Taylor	<b>Date Manager Registered:</b> 01 April 2005
<b>Categories of Care:</b> RC-I, RC-DE	<b>Number of Registered Places:</b> 37
<b>Number of Residents Accommodated on Day of Inspection:</b> 35	<b>Weekly Tariff at Time of Inspection:</b> Trust Rates

## 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 inspector spoke with Mr Sam Varghese, Estates, South Eastern Health and Social Care Trust.

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 & 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 unannounced secondary care inspection dated 20 January 2015. The completed QIP was returned and was approved as acceptable and signed-off by the care inspector on 09 March 2015.

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

Previous Inspection Statutory Requirements		Validation of Compliance
<b>Requirement 1</b>  <b>Ref:</b> Regulation 27(2)	The Trust's estate staff are currently in the process of replacing several unacceptable floor finishes throughout the home. The manager should ensure that this work is completed without undue delay.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Confirmed during visual inspection of home.	
<b>Requirement 2</b>  <b>Ref:</b> Regulation 27(2)	The hardboard bath panels in the Hamilton Suite Bathroom are damaged and cannot be adequately cleaned. These panels should be repaired or replaced to ensure that any infection control issues are removed.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Confirmed during visual inspection of home.	
<b>Requirement 3</b>  <b>Ref:</b> Regulation 27(2)	The floor and wall finishes at the recently installed washer disinfectors should be made good to ensure that any infection control issues are removed.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Confirmed during visual inspection of home.	

<p><b>Requirement 4</b></p> <p><b>Ref:</b> Regulation 27(4)</p>	<p>The fire risk assessment was completed in May 2006 and was fully implemented at this time. However, it has not been audited since this date to ensure it remains valid. HTM84 clearly states that; <i>'The fire risk assessment should be reviewed (and if necessary revised) each year and whenever:</i></p> <ul style="list-style-type: none"> <li>• <i>There is reason to believe that it is no longer realistic; or</i></li> <li>• <i>There has been a significant change in the activity carried on in the premises; or</i></li> </ul> <p><i>There has been as significant change in the number or dependency of the residents.'</i></p> <p><b>Action taken as confirmed during the inspection:</b> Inspector confirmed the current fire risk assessment was undertaken on 11 November 2014.</p>	<b>Met</b>
<p><b>Requirement 5</b></p> <p><b>Ref:</b> Regulation 27(4)</p>	<p>Consideration should be given to the provision of a vision panel in the designated smoking room door. This would enable staff to supervise this area without having to enter the room.</p> <p><b>Action taken as confirmed during the inspection:</b> Confirmed during visual inspection of home.</p>	<b>Met</b>
<p><b>Requirement 6</b></p> <p><b>Ref:</b> Regulation 27(4)</p>	<p>The portable fire-fighting equipment is now overdue its annual service since July 2010. Ensure this is completed without any further delay.</p> <p><b>Action taken as confirmed during the inspection:</b> Inspector confirmed the annual service of this equipment was undertaken within the last 12 months.</p>	<b>Met</b>
<p><b>Requirement 7</b></p> <p><b>Ref:</b> Regulation 27(2)</p>	<p>External paths should be maintained level, clear of debris and slip resistant at all times. Careful attention should be paid to the paving slabs at the rear patio area.</p> <p><b>Action taken as confirmed during the inspection:</b> Confirmed during visual inspection of home.</p>	<b>Met</b>

<b>Requirement 8</b>  <b>Ref:</b> Regulation 27(2)	The inspection and testing of portable electrical appliances throughout the home was labelled as being due in February 2010. Ensure that suitable testing of these appliances is in place to meet all current legislation.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Inspector confirmed that the most recent inspection and testing was undertaken on 10 March 2015.	

### 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 of improvement were deemed necessary as a result of this inspection. This is to be commended.

<b>Number of Requirements</b>	<b>0</b>	<b>Number Recommendations:</b>	<b>0</b>
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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.

**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.

**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**

No areas of improvement were deemed necessary as a result of this inspection. This is to be commended.

<b>Number of Requirements</b>	<b>0</b>	<b>Number Recommendations:</b>	<b>0</b>
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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. 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)**

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**

Ensure that when the fire risk assessment is next reviewed, the person carrying out the review holds professional body registration or third party certification for fire risk assessment and is registered accordingly with the relevant body. Reference should be made to correspondence issued by RQIA to all registered homes on 2 April 2015 and the guidance contained therein.

- [http://www.rqia.org.uk/cms\\_resources/letter%20re%20accreditation%20for%20FRAs\\_Marc\\_h2015.pdf](http://www.rqia.org.uk/cms_resources/letter%20re%20accreditation%20for%20FRAs_Marc_h2015.pdf)

<b>Number of Requirements</b>	<b>0</b>	<b>Number Recommendations:</b>	<b>1</b>
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## 5.6 Additional Areas Examined

No additional areas were examined during this estates inspection.

## 6. Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Ms Angeline Taylor, 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 will 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](mailto: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

### Recommendations

<p><b>Recommendation 1</b></p> <p><b>Ref:</b> Standard 29</p> <p><b>Stated:</b> First time</p> <p><b>To be Completed by:</b> Upon review of fire risk assessment</p>	<p>Ensure that when the fire risk assessment is next reviewed, the person carrying out the review holds professional body registration or third party certification for fire risk assessment and is registered accordingly with the relevant body. Reference should be made to correspondence issued by RQIA to all registered homes on 2 April 2015 and the guidance contained therein.</p>
	<p><b>Response by Registered Manager Detailing the Actions Taken:</b></p> <p>Our Risk Assessments are carried out internally by our Fire Officers who have attended the C.S.Todd &amp; Associates Fire Risk Course.</p> <p>We also have audits carried out by our external qualified consultants .</p>

<b>Registered Manager Completing QIP</b>	Angie Taylor	<b>Date Completed</b>	29.06.15
<b>Registered Person Approving QIP</b>	Sarah Browne	<b>Date Approved</b>	06.07.15
<b>RQIA Inspector Assessing Response</b>	<b>Gavin Doherty</b>	<b>Date Approved</b>	<b>20.07.2015</b>

*\*Please ensure the QIP is completed in full and returned to [estates.mailbox@rqia.org.uk](mailto:estates.mailbox@rqia.org.uk) from the authorised email address\**