



The Regulation and
Quality Improvement
Authority

Strabane & District Caring Services
RQIA ID: 11067
32-34 Bridge St
Strabane
BT82 9AE

Inspector: Raymond Sayers
Inspection ID: IN021531

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**Announced Estates Inspection
of
Strabane & District Caring Services**

28 January 2016

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

1. Summary of Inspection

An announced estates inspection took place on 28 January 2016 from 10.00am to 12.00am. 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;

- The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003
- The Day Care Settings Regulations (Northern Ireland) 2007
- The Day Care Settings Minimum Standards (DHSSPS, 2012).

1.1 Actions/Enforcement Taken Following the Last Inspection

Other than those items 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	0	0

This inspection resulted in no requirements or recommendations being made. Findings of the inspection can be found in the main body of the report.

2. Service Details

Registered Organisation/Registered Person: Strabane and District Caring Services/Mr Gerard Mario Harkin	Registered Manager: Ms Jacqueline Timoney
Person in Charge of the Premises at the Time of Inspection: Ms Jacqueline Timoney	Date Manager Registered: 16 October 2009
Categories of Care: DCS-PH	Number of Registered Places: 10
Number of Service Users Accommodated on Day of Inspection: 10	Weekly Tariff at Time of Inspection: 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 25: Premises and Grounds
Standard 27: Safe and Healthy working Practices
Standard 28: Fire safety

4. Methods/Process

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

Prior to inspection the following records were analysed: Previous estates inspection report and statutory notifications over the past 12 months period.

During the inspection the inspector met with Mr Gerard Harkin & Ms Jacqueline Timoney.

The following records were examined during the inspection: Copies of competent person service inspection records, site user maintenance log books relating to building and engineering services, legionellae risk assessment and fire risk assessment.

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the service was an announced care inspection dated 15 October 2014, reference IN020545. The completed QIP was returned, reviewed and approved by the care inspector on 15 January 2015.

5.2 Review of Requirements and Recommendations from *the last Estates Inspection* completed on 11 March 2013.

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulations 14.(2)(a) & (c)	<p>Carry out a comprehensive risk assessment with regards to the control of legionella bacteria in facility`s hot and cold water systems.</p> <p>Ensure that the control measurements required as a result of this risk assessment are fully implemented, with records maintained and available for inspection within the centre.</p> <p>Reference should be made to:</p> <ul style="list-style-type: none"> • Control of legionella bacteria in hot and cold water systems, ACOP `L8` issued by the Health and Safety Executive NI • Health Technical Memorandum 04-01 The control of legionella , hygiene, safe hot water, issued by Department of Health, social Services and Public Safety NI. 	Met
	<p>Action taken as confirmed during the inspection:</p> <p>A legionella RA had been completed and recommended control measures are implemented.</p>	

5.3 Standard 25: Premises and grounds - *The premises and grounds are safe, well maintained and remain suitable for their stated purpose*

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.

[There were no issues identified for attention during this inspection.]

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.

[There were no issues identified for attention during this inspection.]

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.

[There were no issues identified for attention during this inspection]

Areas for Improvement

None identified.

Number of Requirements	0	Number Recommendations:	0
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5.4 Standard 27: Safe and healthy working practices - *The Centre is maintained in a safe manner, and safe and healthy working practices are promoted in all aspects of its work.*

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.

[There were no issues identified for attention during this inspection.]

Is Care Effective? (Quality of Management)

The nature and needs of the service users are considered as part of the risk assessment processes and this is reflected in the management of the premises. This supports the delivery of effective care.

[There were no issues identified for attention during this inspection.]

Is Care Compassionate? (Quality of Care)

There are health and safety procedures and control measures in place which support the delivery of compassionate care.

[There were no issues identified for attention during this inspection.]

Areas for Improvement

None identified.

Number of Requirements	0	Number Recommendations:	0
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5.5 Standard 28: Fire safety - *Fire safety precautions are in place that reduce the risk of fire and protect service users, staff and visitors in the event of fire.*

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.

[There were no issues identified for attention during this inspection.]

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 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 effective care.

[There were no issues identified for attention during this inspection.]

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.

[There were no issues identified for attention during this inspection.]

Areas for Improvement

None identified.

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

1. It was noted that a Gas Safe Register inspection had been completed on the kitchen gas appliances on 6 Jan 2016, and that the subsequent report listed several requirements to be implemented by the registered person; the registered person indicated that the report requirements would be implemented; however the kitchen was not registered as part of the day care service.

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.

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.

Registered Manager	Jacqui Timoney	Date Completed	08/02/2016
Registered Person	Gerard Harkin	Date Approved	08/02/2016
RQIA Inspector Assessing Response	Raymond Sayers	Date Approved	05/04/16

Please provide any additional comments or observations you may wish to make below:

Please complete in full and returned to RQIA from the authorised email address